

## **Historic, archived document**

Do not assume content reflects current scientific knowledge, policies, or practices.

# HOMELESSNESS IN AMERICA

Selected Topics

Prepared for

The Interagency Council on the Homeless

By

Peter H. Rossi

With the Assistance of

Eleanor Weber  
Kathleen Morley

September 15, 1989

Social and Demographic Research Institute  
University of Massachusetts  
Amherst, MA 01003

## PART I: INTRODUCTION

Save for the fact that virtually all agree that homelessness is a dreadful condition, there is virtually no other aspect of that problem about which we have comparable consensus. In particular, when it comes to knowledge about trends in homelessness and the size and composition of the homeless at any point in time, we lack exactly the right kind of data that is of reasonable levels of precision. In part, we are in this unhappy state because the condition of the homeless places them just out of our reach when using the conventional tools of social research: Census and surveys, the tools we use to measure most social conditions, ordinarily proceed on the assumption that all persons in the United States have addresses at which they can be reached, reasonably true for most Americans, but patently inappropriate for the homeless. In part, we lack precisely calculated dimensions to homelessness because we are not completely agreed on what the "home" in "homeless" means: Do we mean shelter plus the amenities and social supports that the larger sense of home connotes, a reasonably intact dwelling unit with all the amenities and populated by a spouse and children? Or, do we mean just the absence of some sheltered spot that is heated in the winter and secure against the elements and predators? Clearly the size and composition of the homeless might vary widely depending on which definition of homelessness was taken. Finally, precision is lacking because the problem is changing. There can be no doubt that, however defined, homelessness has increased over the last decade along with institutional responses to homelessness -- shelters, food kitchens, special legislation and the like. There is also some evidence that the demographic composition of the homeless has also changed. However, as with the uncertainty over the numbers of the homeless, there is little consensus either on the rate of increase of this group or on the nature of the changes in its demographic composition.

Despite the difficulties discussed above, each passing year we have learned more and more about the homeless. The definitive study has yet to be undertaken - and may never be designed or carried out - but, the additional research that has been undertaken in each successive year is amounting to more and more knowledge about this unfortunate segment of our society.

The purpose of this paper is to summarize what we can learn from the work undertaken over the past decade. We present three distinct contributions: In Part II, we summarize data

on the characteristics of the 1980s homeless as shown in 56 homeless studies. In Part III we use studies undertaken of the homeless in the late 1950s and early 1960s to describe how the nature of homelessness and the composition of homeless people have changed in the last two decades. In Part IV, we explore the implications of enlarging the conception of homelessness to include people with precarious claims on the housing they occupy. The "precariously housed" are defined as persons whose incomes are so low and their social supports so meager that they are at high risk of becoming homeless. In this section, we will provide estimates of the contemporary size of the precariously housed and trends in that population over the past two decades.

## PART II: HOMELESSNESS IN THE 1980s: An Inventory of Research Findings

For most of the post-World War II period, homelessness has not been a major topic of social research. In the 1950s and 1960s there was a brief flurry of research interest in the topic because in many cities Skid Row areas were seen as obstacles in the path of plans to enlarge and upgrade downtown business districts. The researches undertaken were motivated by the issue of what to do about Skid Row residents when the areas were upgraded. As we will show in greater detail in Part III, the researchers concluded that Skid Rows and homelessness were both in precipitous decline. The problems they presented would simply disappear within a decade or two.

The 1950s' and 1960s' predictions of social researchers were contradicted within a short period of time as homelessness began to increase in the latter half of the 1970s, becoming increasingly obvious in the 1980s. The increased presence of homeless people on the streets and in the emergency shelters sparked public concern that in turn led to a revival of social research on homelessness.

The publicly available literature on the homeless of the 1980s is considerable. Excluding newspaper articles and articles in popular magazines, our bibliography of published and unpublished articles and monographs on homelessness and the homeless contains more than 200 entries. Most are articles of opinion or analyses that rely on information obtained from studies conducted by others. Counting only research articles, papers and monographs, defined as studies based on direct primary data gathering activities, there were at least<sup>1</sup> 56 empirical studies of the homeless since 1980.

---

<sup>1</sup> These are studies that have either been published in professional journals, as monographs distributed by recognized publishing houses, or widely distributed as reports or conference papers. There are undoubtedly additional researches that have not come to our attention or which are currently underway. Typically, there is a lag of at least a year (and usually longer) between data gathering and publication. Studies currently underway (Summer 1989) are not likely to be widely available before 1990.

#### A. Characteristics of the 1980s Homeless Studies

The 56 studies vary widely in a number of important ways. Table II.1 provides data describing that variation. Panel A tabulates the studies by the year in which data collection took place. Although there were some studies conducted in 1981 and 1982, social research on the homeless did not get underway on a serious scale until 1983: Indeed, the bulk of the studies, 43, were conducted between 1983 and 1986. Possibly because the National Institute of Mental Health funded a number of epidemiological homeless studies in 1984, 1985 saw more studies undertaken than in any other year in the decade. (Appendix A provides complete bibliographic references to each of the 56 studies.)

Since there is typically at least a year lag between data collection and the appearance of written reports or publications, the seeming tailing off of research in 1987 and 1988 may merely represent the fact that studies conducted in those years have yet to appear in accessible form.

As shown in Panel B., the bulk of the research studies (51) are of local communities, mainly cities in the size range of 200,000 or larger. New York is the most frequently studied city, with 12 studies<sup>2</sup>. Los Angeles with 5 studies is the closest runner up and Detroit is not far behind. Clearly the major attention has gone to our major metropolitan areas although some of the smaller places such as Knoxville, Tennessee and Austin, Texas have also come for some attention.

---

<sup>2</sup> This is mainly a tribute to the research activity of New York's Human Resources Administration.

TABLE II.1: Some Characteristics of Homeless Studies of the 1980s

A. Data Collection Year

| Year  | N  | %     |
|-------|----|-------|
| 1981  | 1  | 1.8   |
| 1982  | 3  | 5.5   |
| 1983  | 10 | 18.2  |
| 1984  | 10 | 18.2  |
| 1985  | 13 | 21.8  |
| 1986  | 10 | 18.2  |
| 1987  | 6  | 10.9  |
| 1988  | 3  | 5.5   |
| TOTAL | 56 | 100.1 |

B. Place(s) Studied

1. City or Metropolitan Studies (N=51)

|                         |    |
|-------------------------|----|
| Austin, TX              | 3  |
| Baltimore, MD           | 3  |
| Birmingham, AL          | 1  |
| Boston, MA              | 3  |
| Chattanooga, TN         | 1  |
| Chicago, IL             | 3  |
| Cincinnati, OH          | 1  |
| Denver, CO              | 1  |
| Detroit, MI             | 4  |
| Knoxville, TN           | 1  |
| Los Angeles, CA         | 5  |
| Memphis, TN             | 1  |
| Minneapolis-St Paul, MN | 2  |
| Nashville, TN           | 1  |
| New York, NY            | 12 |
| Philadelphia, PA        | 2  |
| Phoenix, AZ             | 3  |
| Providence, RI          | 1  |
| St Louis, MO            | 1  |
| Washington, DC          | 2  |

2. State Wide Studies (N=3)

|         |   |
|---------|---|
| Alabama | 1 |
| Ohio    | 1 |
| Utah    | 1 |

3. National Studies (N=2)

|                                |   |
|--------------------------------|---|
| 16 judgment selected sites     | 1 |
| Systematic sample of 20 cities | 1 |

TABLE II.1: (cont'd) Some Characteristics of Homeless Studies of the 1980s

C. Approach Used

|   | Number<br>Using |
|---|-----------------|
| Shelter survey                                    | 53              |
| Street survey                                     | 20              |
| Service client survey<br>(food kitchens, clinics) | 10              |

D. Sampling Strategy Used in Shelter and Street Surveys

|                                     | Shelter | Street | Clinic/<br>Foodline |
|-------------------------------------|---------|--------|---------------------|
| Probability or<br>Systematic Sample | 29      | 9      | 9                   |
| Judgment Sample                     | 6       | 4      | 1                   |
| Full Census                         | 17      | 4      | 0                   |
| Unknown Strategy                    | 1       | 3      | 0                   |

E. Sample Sizes and Response Rates

|                    | Average | SAMPLE SIZES<br>Range | Average<br>Response<br>Rate |
|--------------------|---------|-----------------------|-----------------------------|
| Shelter Sample     | 826     | 35 - 7578             | 86% (32) <sup>a</sup>       |
| Street Sample      | 205     | 17 - 714              | 79% (8) <sup>a</sup>        |
| Total Sample Sizes | 787     | 35 - 7578             | NA                          |

<sup>a</sup> Number of studies reporting response rates.



Three of the studies are state wide research attempts, involving the states of Ohio, Utah and Alabama.

Only two<sup>3</sup> are national studies, one based on the clients of the Robert Wood Johnson-Pew Memorial Trust medical clinics for the homeless established in 20<sup>4</sup> cities, and the other a study of shelter dwellers and foodline clients sponsored by the U. S. Department of Agriculture and carried out by the Urban Institute.

Despite the considerable controversy centering around the definition of homelessness, as shown in Panel C., researches concentrate largely on surveying persons living in shelters, encountered on the streets, or served on foodlines or in medical clinics. Almost all (53) of the studies are based at least in part on surveys undertaken with shelter residents. One in three (20) used surveys with homeless persons who were not in shelters but out on the streets or in public places. A minority (10) of the studies were based in part on samples of homeless persons encountered on food lines or as clients in clinics or other places serving homeless persons.

Sampling methods used also varied widely, as shown in Panel D. Although most of the sample designs used were either full enumerations (as in censuses) or systematic or probability samples, 11 of the surveys used judgment procedures to select respondents and four did not provide enough information to code the sampling strategy used.

Based upon information contained in the reports on each of the studies, we divided the 56 studies into two groups, each comprising half of the studies, based on the "quality" of the technical procedures used in the study. In this context, "quality" reflects primarily "generalizability", the capability of producing results that can be generalized beyond the specific research site. There were few studies that were excellent in every respect. We ended up giving high "quality" to studies that used systematic or probability methods of sampling, and that did not

---

<sup>3</sup> Conspicuous by its absence is the 1984 HUD Report, omitted from this list because its data was not generated by primary data collection, involving interviews with homeless persons.

<sup>4</sup> Full data on the socio-demographic characteristics of clinic patients are available for 16 sites, and for those, only for a subsample who visited the clinics more than once.

sample some special segment of the homeless (e.g. studies that were based on residents of shelters maintained for chronically mentally ill were given low quality ratings along with studies of the street homeless only in one location). We also stressed high response rates, 75% or higher, when available. In putting together the data presented in the remainder of this section, we tested each finding to see whether "quality" studies differed from all the studies. Where there were differences, they are noted.

Taken altogether, about 44,000 homeless persons were interviewed in the 56 studies. However, most of the studies were relatively small: As shown in Panel E., the average shelter sample size was 826, with a range from 35 to 7,578 (New York). The average street sample was much smaller, 205, with a range from 17 to 714.

Panel E also indicates that response rates were very high: 86% for the 32 shelter samples reporting and 79% for the 8 street samples. A clear message from this experience is that homeless persons are not noticeably more difficult to interview than the domiciled since these response rates are as good or better than obtained routinely in sample surveys of the general population.

## B. Demographic Features of the Homeless

We can use the 56 studies to obtain estimates of some salient characteristics of the homeless population in the 1980s. Table II.2 presents averages<sup>5</sup> concerning major demographic characteristics computed across the 56 studies. Thus the first item "Percent Male" indicates that across the 55 studies that reported sex of their respondents, the average of the reported percentages of the homeless who were male was found to be 76.8%. Note also that one of the studies did not report the sex of the homeless interviewed in that study.

---

<sup>5</sup> The "averages" and "medians" we will present are actually "averages of averages" or "medians". They are calculated by averaging across the averages found in the studies that present that information. In effect, these "averages" give equal weight to each study.

The range reported is rather large, primarily because several studies were conducted in shelters that were restricted either to males or to females. The standard deviation<sup>6</sup> of the percent male, 22%, indicates two thirds of the studies report between 55% and 100% male. Clearly the majority of the homeless of the 1980s<sup>7</sup> were males.

All of the homeless studies report that majorities of the homeless are not currently married.<sup>8</sup> The smallest proportion unmarried was 60% and the largest was 100% unmarried. Overall, the average percent unmarried was 88%, indicating that close to nine out of ten of the homeless had either never married, or experienced marriages broken by death, divorce or separation. Few<sup>9</sup> of the one in ten who reported being part of a current marriage were living with their spouses.

The calculated median and average age are almost identical. The average homeless person is 36 years of age and half of the homeless are younger than 36. Clearly homelessness is a condition that is affecting persons in their prime of life. Indeed, more than one in three (35%) are under 30 years of age. Correspondingly, there are few (9%) who are 60 or over.

The age composition of the homeless is one of its least varying demographic characteristics. There is very little variation in the average age of the homeless by location: The high, 43 years, was recorded in Los Angeles and the lowest, 30 in St Louis, MO, with most of the cities within one or two years of the overall average of 36.

---

<sup>6</sup> Not reported in Table II.2.

<sup>7</sup> There also appear to be no clear trends in the 1980s. Studies conducted up to 1985 differed little from those conducted after 1985 in the average percentage reported as male. We also restricted the comparison only to studies rated as "high quality" with no discernable trend shown.

<sup>8</sup> The "unmarried" or "not currently married" consist of persons who never married plus the divorced, separated and widowed. "Married" persons may or not be living currently with their spouses. Indeed, the overwhelming majority of the homeless who reported themselves as "married" were not accompanied by their spouses.

<sup>9</sup> Only five studies reported on this issue. In none of the five were more than 1% of the homeless living with a spouse. Correspondingly the homeless families encountered in the studies are almost all single parents accompanied by their young children.

TABLE II.2: Summary Demographic Measures of the HomelessNOTE: Study Quality Differences Marked by Asterisks<sup>b</sup>

| Demographic Feature                      | Average | Range     | Number of Studies |
|--|---------|-----------|-------------------|
| Percent Male                             | 76.8    | 0 - 100   | 55                |
| % Not currently married <sup>a</sup>     | 88.3    | 60 - 100  | 37                |
| Median Age                               | 36.0    | 29 - 53   | 35                |
| Average Age                              | 36.4    | 30 - 43   | 33                |
| % 30 or less                             | 35.2    | 15 - 100  | 31                |
| % 60 or more                             | 8.6     | 1 - 60    | 38                |
| % Black                                  | 45.8    | 8 - 90    | 49                |
| % Hispanic                               | 12.4    | 1 - 31    | 35                |
| % Native American                        | 6.0     | <1 - 23   | 18                |
| Average months homeless <sup>c</sup>     | 22.2*   | 3 - 49    | 12                |
| % Homeless 6 months or more <sup>c</sup> | 43.4*   | 20 - 70.0 | 17                |
| % Homeless 1 year or more <sup>c</sup>   | 27.8*   | 4 - 49.0  | 20                |

<sup>a</sup> Consisting of never married, divorced, widowed, and separated.<sup>b</sup> The 28 studies rated as high quality are compared with those who did not receive high quality ratings. Significant differences found at the  $p < .10$  are marked with asterisks.<sup>c</sup> The higher quality studies found lower values: 18 Months for average months homeless; 36% for homeless 6 months or more and 22% homeless for one year or more.

In contrast, the ethnic composition of the homeless is highly variable. For example, although the overall average proportion black is 46%, in some places, e.g. Washington, DC and New York, blacks constitute very large majorities (74% and 66%, respectively) while in other places blacks are only small proportions, e.g. 9% in Phoenix and 12% in Austin. Perhaps the overall proportion black is best represented by the two national studies which register the same proportion, 41% black.

Although overall, only 12% of the homeless are counted as Hispanic, that proportion also varies widely by place ranging from a high of 31% in New York to a low of 1% in Philadelphia. (Note that only 35 studies recorded Hispanic ethnicity, perhaps because in those places, such as Baltimore and Birmingham, Hispanics do not constitute significantly large population groups generally.)

Even fewer studies, 18, took note of native Americans as an ethnic group and the average across the 18 was 6%. The highest proportion, 23%, was recorded in Minneapolis and the next highest 11% in Denver. We have only one of the national studies, the 16 city medical clinic client study providing a national estimate of the proportion of the homeless who are native Americans, 1%.

Clearly, the ethnic composition of the homeless varies according to the ethnic composition of the specific locale being studied. It is also abundantly clear that those local minority groups that are most prevalent in a place also contribute heavily to the homeless, usually in proportions far beyond their share in the general population. For example, blacks and Hispanics (mainly Puerto Ricans) in New York City together make up 82% of the homeless population but only 45% of the general population of the city (in 1980), being "over" represented among the homeless by a factor of almost 2.

The bottom three lines of Table II.2 contain data on the lengths of time homeless recorded in the few studies that collected that information. The average number of months homeless, 22, means that overall the homeless persons studied had been homeless for almost two years. Clearly, this is a misleading statistic since all of the homeless who were queried were part way through their episode of homelessness and the full length of their periods of homelessness are unknown.<sup>10</sup>

These average duration times are misleading in another sense as well. The few studies that collected and then displayed the distribution of the lengths of time homeless, show distributions that are quite heterogeneous, with no clear clustering around central tendencies. Averages and medians can be quite misleading when calculated from distributions of that sort. Large proportions of the homeless are in that condition for very short episodes, lasting a few weeks, and large proportions have been homeless for years. The average computed across such a distribution obviously does not represent the central tendency in that population primarily because there is no central tendency.

#### b. Socio-economic Characteristics of the Homeless

Table II.3 displays a number of income and employment measures, providing further documentation that the homeless are in extreme poverty. Unfortunately, only one fourth of the 56 studies collected income data, the majority of the researchers perhaps believing that the obvious needs little elaboration. We believe that in this case, the obvious needs constant reiteration: The economic position of the homeless is so clearly catastrophic that the mystery is how so many can survive on so little.

The average monthly income, defined as-including money income of all kinds<sup>11</sup>, was

---

<sup>10</sup> If we make the reasonable assumption that the eventual length of time homeless is not increasing drastically, a good estimate of the eventual length is twice the length found at any point in time. Under such conditions, the average length of time homeless is about three and a half years, using data from all the studies, and about three years, if we consider only the "high quality" studies.

<sup>11</sup> Income includes earnings, transfer payments, pensions, gifts and donations -- in short, all income received in monetary units. Income excludes payments in kind. e.g. shelter, or in services, e.g. medical care.

\$174. (When only high quality studies are considered, the average drops to \$127.) Given this income level, there can be no mystery about why the homeless are without conventional shelter. There are few, if any, housing units that rent for around \$127 per month<sup>12</sup>. Furthermore, it is not reasonable to spend all of one's income for housing. The average monthly income and the median monthly income is simply so low that our current housing industry cannot supply housing to this group without considerable subsidy.

It should be borne in mind that although a median monthly income of \$104 implies about \$3.50 per day, that does not mean a steady daily income. Rather, life among the homeless more likely consists of many periods with some income interspersed with periods without any money at all even for those whose monthly incomes are above the median or the average. It also means that there is no surplus above and beyond what is needed for daily needs and hence there are no reserves of savings to draw upon.

Indeed, without the shelters, food kitchens, clothing depots and medical clinics, the homeless could not manage sheer existence. It should also be noted that these service institutions also sustain the precariously homed. A large proportion of the clients of food lines and medical clinics are very poor persons living in conventional housing who use these facilities reserving their cash income for housing. (Sosin, Coulter and Grossman, 1988; Burt and Cohen, 1988.)

---

<sup>12</sup> Flophouse rents reported for 1982 (Cohen and Sokolovsky, 1989) in New York were \$100 per month. SRO rents in Los Angeles reported for 1987 were \$250 (Hamilton, Rabinovitz and Alschuler, 1989).

TABLE II.3: Income and Employment of the Homeless

NOTE: Study Quality Differences Marked with Asterisks

| Measure                             | Average | Range     | Number of Studies |
|-------------------------------------|---------|-----------|-------------------|
| Average Monthly Income <sup>a</sup> | \$174*  | 24 - 337  | 15                |
| Median Monthly Income <sup>a</sup>  | \$104*  | \$0 - 400 | 14                |
| % Currently Unemployed              | 80.8    | 25 - 100  | 38                |
| % On General Assistance             | 19.7    | 4 - 55    | 25                |
| % On SSI                            | 10.4    | 2 - 38    | 27                |
| % On AFDC                           | 6.3     | <1 - 21   | 12                |

<sup>a</sup> Average and median incomes reported in the 28 high quality studies were lower; average = \$127; median = \$57.



All of the studies show that few of the homeless participate in income transfer programs. The income maintenance programs for which most of the homeless may be eligible are state programs, funded entirely by the states, variously called "general relief" or "general assistance", for which destitute persons who are not eligible for other programs may apply, provided that the state in question has enacted such a program.<sup>13</sup> Only one in five (20%) participated in "general assistance" programs. One in ten (10%) received Supplemental Security Insurance payments, a Social Security Administration program for disabled persons and for those over 65 with inadequate retirement benefits.

Given the sex distribution shown in the previous section, it is no surprise that very few (6%) receive AFDC payments, a program for which only adults with responsibility for minor children are eligible. Since the overwhelming majority of the homeless are males who are homeless alone, it is surprising that even 6% of the homeless participate in AFDC. This means that a very large proportion of the women who are homeless are also heading up families consisting of their minor children. Indeed, almost all of the families reported as homeless in the studies under review are female headed, single parent families.

The interpretation of the low rates of participation in income benefit programs for the homeless is somewhat ambiguous. Under one view, such low rates may simply mean that the homeless do not apply for and/or have difficulty establishing their eligibility for such programs. Another interpretation is that those very poor persons who participate are raised high enough in income to avoid or to leave the homeless condition. Indeed, there is evidence for both interpretation. Although AFDC payments are by no means capable of supporting great extravagances, they are often enough to cover low to modest rentals.<sup>14</sup> Indeed, in the Chicago study (Rossi, 1989) a majority of the homeless AFDC recipients had been homeless for only a few weeks, suggesting that AFDC mothers and their children quickly find their way back into conventional housing. In a 1985 study of Chicago General Assistance newly enrolled recipients, Stagner and Richman (1986) found that the typical client resembled the Chicago homeless in

---

<sup>13</sup> A half dozen states, mainly in the South, have not enacted general assistance programs.

<sup>14</sup> Perhaps even more important is the "steadiness" of AFDC payments.

age, sex, and employment, but all but a handful were in conventional housing, typically sharing their parents' home. Apparently, the extremely poor who were housed found it easier to get on the rolls.

### c. Disability Prevalences Among the Homeless

In this section, we turn to a consideration of the prevalences of various kinds of disabilities among the homeless, in the form of the data summaries shown in Table II.4. A variety of conditions are considered as disabilities in that table. Because of the considerable interest in the question of how deinstitutionalization of the chronically mentally ill has affected the size and composition of the homeless, two out of three (68%) of the studies obtained some information on mental illness, mostly self reports on previous hospitalizations for psychiatric reasons. Almost as much interest is given to other kinds of disabilities, including alcohol abuse and physical disabilities. Although not always regarded as a disability, we include prior prison and jail sentences as also constituting conditions that limit a person's full participation in many activities. The final disability is non-participation in a supportive social network, may be regarded as a disability because the absence of a supportive network of friends and relatives might increase one's vulnerability to becoming homeless as the result of economic misfortunes.

At least some of the literature on the homeless is concerned with whether the disabilities of the homeless are caused by their homeless condition or are themselves the precipitating conditions for homelessness. Many of those holding the first position regard the identification of disabilities among the homeless as instances of "blaming the victim". None of the studies reviewed here, of course, can settle the causation issue: Cross-sectional studies simply cannot show which conditions occur first.

The arguments raised in the last paragraph are not academic issues. As a quick glance at the first column of Table II.4 will show, the homeless suffer from high prevalence levels of all the disabilities described: About one in four (24%) have been hospitalized in a psychiatric facility. This prevalence rate is about five times the life time prevalence of such hospitalizations in the general population. Another measure of mental illness is researcher judgments of mental illness, usually the result of applying a scale measuring mental health. On these measures, about one in three (33%) of the homeless can be regarded as mentally ill. Both these measures are indicators of severely high prevalence levels of mental illness among the homeless.

Much the same levels of alcoholism are also shown. Almost one in three (29%) has been a patient in a detoxification unit. Slightly more than one in four (26%) is judged to have alcoholism problems by the researcher, usually on the basis of self reports on drinking habits.

TABLE II.4: Prevalences of Disabilities Among the Homeless

NOTE: Study Quality Differences Marked with Asterisks

| Measure                                  | Average | Range    | Number of Studies |
|--|---------|----------|-------------------|
| A. Measures of Mental Illness            |         |          |                   |
| % With Psychiatric hospitalization       | 23.9    | 10 - 100 | 38                |
| % judged as having "mental problems"     | 33.4    | 4 - 100  | 22                |
| B. Measures of Alcoholism                |         |          |                   |
| % With Detoxification experience         | 28.6    | 4 - 76   | 21                |
| % Judged as having "alcoholism problems" | 26.4    | 3 - 71   | 26                |
| C. Measures of Health                    |         |          |                   |
| % Too disabled to work                   | 25.3    | 3 - 63   | 18                |
| % self rated in Poor Health <sup>a</sup> | 37.0*   | 19 - 66  | 17                |
| D. Measures of Criminal Involvement      |         |          |                   |
| % Self reported "felony prison term"     | 18.4    | 4 - 49   | 19                |
| % self reported "jail term" <sup>a</sup> | 32.9*   | 11 - 82  | 17                |
| % either prison or jail                  | 40.8    | 8 - 82   | 26                |
| E. Measures of Social Support            |         |          |                   |
| % reporting no friends                   | 36.0    | 2 - 87   | 14                |
| % Reporting no contact with family       | 31.4    | 12 - 50  | 18                |

<sup>a</sup> High quality studies reported an average proportion serving jail sentences of 46.9% and an average proportion reporting "poor health" as 42.0%.

Physical disability levels are also about as high. Almost two in five<sup>15</sup> (37%) considered themselves to be in fair or poor health (as compared to 18% in surveys of the general population). One in four (25%) considered themselves to be too disabled to work. These prevalence levels ought to be considered in relation to the relatively low average age of the homeless, a contrast in which the homeless prevalence rates can be seen as especially high.

The homeless have also been frequently involved in the criminal justice system. Especially serious is the fact that almost one in five (18%) have served time in state or federal prisons after being convicted on felony charges. It should also be considered that being sent to prison on a felony charge is usually the outcome of having been convicted (but not imprisoned) on other previous charges, implying that many of the homeless have criminal records involving several felony convictions.

It is also not surprising that incarceration in jail is a frequent occurrence among the homeless: Overall one in three<sup>16</sup> are reported as having spent some time in jail, usually as the result of convictions on misdemeanor charges. Given the life led on the streets and in public places plus the levels of alcoholism and chronic mental illness it is not at all surprising that so large a proportion of the homeless have spent some time in jail.<sup>17</sup>

The final entries in Table II.4 are crude measures of the extent to which the homeless are tied into supportive social networks. Of course, the measures involve whether or not the homeless have any friends and how often have they been in contact with their families. Neither

---

<sup>15</sup> Note that studies rates as high quality had a slightly higher average, 42%, rating themselves as in fair or poor health.

<sup>16</sup> Note that a much higher prevalence rate (47%) is reported as the average for high quality researches.

<sup>17</sup> In some studies, jail terms and prison terms were not separated, leading to the findings that more than two in five (41%) have either been jailed or imprisoned or experienced both, a number that is consistent with the findings in other studies in which jail and prison episodes were treated separately.

of these questions directly concern support of a tangible or intangible variety. Rather they simply gather information about the pre-conditions for social supports: Clearly, if you have no friends and are not in contact with family and relatives, you have little chance of getting support from either. Contacts with friends or relatives does not assure support, however.<sup>18</sup>

On the average, more than one in three (36%) of the homeless report that they have no friends. Being without friends is not unknown in the general adult population, but it is fairly rare for both men and women on the younger side of 60. Almost as high is the proportion, 31%, who have no contact with family or relatives. In this case, it is also difficult to calibrate how abnormally elevated is this proportion, although it does appear to be high.

It should be noted that any one of the disabilities shown in Table II.4 affects large minorities among the homeless, ranging from one in five to one in three. Of course, the converse is also true, namely that large majorities do not suffer from any one of the disabilities. However, if the joint occurrences of these disabilities are tabulated, as in at least one of the studies (Rossi, 1989), majorities can be found to suffer one or more of them. Chronic mental illness and chronic alcoholism can be fairly frequently found affecting the same individuals; nevertheless when we consider both conditions, about half of the homeless were found to be suffering from either alcoholism or mental illness or both. It is likely that most of the homeless may be suffering from one or more of the conditions discussed in Table II.4.

### Summary

Despite differences among the 56 studies, there are several characteristics of the homeless over which there is considerable consensus, as follows:

1. A major feature of the homeless is their extreme poverty, at levels close to destitution. Monthly incomes are so low that there is no way that market rents that are not close to zero can be afforded.

---

<sup>18</sup> The issue of social supports is a critical one for understanding homelessness. As we will show in the last part of this report, one of the critical differences between the homeless and the much larger number of extremely poor unattached persons who are housed is that the latter are sharing housing with friends and relatives, among which parents predominate. This finding suggests that having close ties with others, especially primary kin, can serve as a safety net preventing descent into homelessness.

2. The homeless are spouseless. Not having formed a primary family of one's own or having a failed marriage is almost universal among the homeless.
3. Although homelessness is still predominantly a young man's affliction, women form a sizable minority.
4. The homeless also lack other primary ties to parents, siblings, and other relatives and have formed fewer friendships than is typical for young adults.
5. High disability prevalence levels exist among the homeless: Sizable minorities ranging from one in five to one in three show signs of mental illness, substance abuse, physical defects, and periods of incarceration in prisons and/or jails.

### PART III: THE "NEW" HOMELESS AND THE "OLD"<sup>19</sup>

Before the current decade, the Great Depression of the 1930s was the last time in which homelessness was so prevalent. As it is today, in the 1930s there was no clear conception of how many were homeless, only that the number was too large to be acceptable. In any event, before they could be definitively counted, the homeless of the time diminished in number to acceptable levels. The outbreak of World War II in Europe, leading to the rearmament of the United States and our subsequent entry into the war in 1941, drastically reduced the homeless population, absorbing them into the armed forces and into burgeoning war industries.

The young homeless of the Depression that many social commentators worried might become permanently unemployed virtually disappeared, along with many of the agencies and programs set up during the depths of the Depression to provide relief and employment to the unemployed. Municipal lodging houses and emergency shelters were closed: what remained of the homeless were apparently left to forage on Skid Row, the bottom tier of the private housing markets.

When the war was over, and employment rates remained high, the prevalence of homelessness remained low. But neither the homeless nor Skid Rows disappeared. In the first two decades of the post war period, the Skid Rows of the nation remained as distinctive neighborhoods, collections of cheap hotels, inexpensive restaurants and cheaper bars, and casual employment agencies. The religious missions that had been dedicated to the redemption of Skid Row residents since the 19th Century were still in business. Business may not have been brisk but it was still enough to keep the Skid Row institutions going.

With the major exception of New York's Bowery, the Skid Rows of our large cities were originally located close to the railroad freight assembly yards, warehouses, and trucking terminals that provided much of the casual employment for Skid Row inhabitants. Changing their locations was made difficult by the restrictions of zoning and building codes, at the same time as their presence in an area depressed building rents and land prices. Even though the structure of

---

<sup>19</sup> Part II is largely adapted from Chapter 2 (same title) of Peter H. Rossi Down and Out in America: The Origins of Homelessness. 1989. The University of Chicago Press. Chicago, IL.



transportation and the relocation of major industries changed the location of transient jobs and casual labor opportunities, the Skid Rows were more or less firmly anchored to urban sections in which they had been established in the early 20th Century.

Since the early 1900s, the rest of the city typically had undergone major changes. Freight railroads were supplemented and later partially supplanted by long distance trucking lines. Unloading freight cars for local trans-shipment was replaced by long distance trucks travelling over the post war interstate highway system and pulling up to factory and warehouse loading docks, as well as by "piggy back" rail freight cars that carry fully-loaded trailers which are driven away by tractors at a terminal and brought directly to their specific destinations. Freed of dependence on fixed railroad tracks, factories and warehouses moved out of the central city to the periphery. Offices and downtown luxury rental apartments expanded their holdings in the downtown center.

In time, the Skid Row that had once been a decent and respectful distance from downtown stores and offices was now a next door neighbor. The physical distance between West Madison Street in Chicago and the corner of State and Adams had not changed but the commercial and administrative activities that were once concentrated at those crossroads had spread west and south up to the borders of Skid Row. Urban "decay" had become a next door neighbor to "modernity and progress".

In the 1950s, as our urban civic elites and public officials turned to the renovation of the central business districts of our cities, the problem of what to do about the collection of unsightly buildings, low quality land use, and unkempt people in the Skid Rows of the nation sparked a revival of social science research on Skid Row and its denizens. Undertaken between 1958 and 1964, and financed under grants from the Housing and Home Finance Agency, the predecessor to HUD, these studies provide us today with considerable detailed information on several of the Skid Rows of major cities and their inhabitants based on fairly modern social research methods.

Taken together, the researches of the 1950s and 1960s can be used to show the ways in which the homeless of today, as described in the homeless researches of the 1980s, are different from and also the same as the homeless of the past. Especially important for our

purposes are studies of New York's Bowery by Bahr and Caplow (1974), of Philadelphia's Skid Row by Blumberg, Shipley and Shandler (1973) and of Chicago's Skid Row areas by Donald Bogue (1963).<sup>20</sup> All of these studies had much the same set of objectives --to find out who was on Skid Row and what to do about them when the area was demolished. Note that the motivation behind the funding of these studies was what to do about Skid Row neighborhoods, not what to do about homelessness.

We will use these three studies as indicators of what homelessness and the homeless were like in the 1950s and 1960s. Of course, Chicago, New York and Philadelphia were not then (and are not now) all of our nation. It would be better to have a much larger set of cities spread more evenly throughout the continent. However, we have to make do with what is available.

By and large, each of the studies emerged with much the same sets of findings, with only slight local variations. The title, Old Men: Drunk and Sober, of Bahr and Caplow's volume on the Bowery in the early 1960s provides a succinct summary of their findings, as the authors perceived them to be. Donald Bogue's (1963) monograph, Skid Row in American Cities, has a title that promised to tell about all the homeless in America, but mainly provided a very thorough<sup>21</sup> description of the homeless of Chicago in 1958. Indeed, for that reason, we will rely on Bogue's monograph more than on any other study in the discussion that follows. In addition, since we will rely heavily on our own study of Chicago homelessness, conducted in 1985 and 1986, Bogue's data provide a more relevant contrast.

Bogue's estimates of the size of Chicago's Skid Row homeless population are fairly precise: by actual count, Bogue found about 12,000 homeless persons in Chicago's Skid Row

---

<sup>20</sup> Other major studies were undertaken in Minneapolis, and Sacramento.

<sup>21</sup>Although all three studies used one or another variant of modern sample survey techniques, Bogue's study was based on more precise delimitations of both the universe and the measurements used and, in addition, includes a census of all those living in cubicle hotels and SROs in the traditional Skid Row area.

in 1958, almost all of whom were men.<sup>22</sup> Bahr and Caplow estimated that about 8,000 homeless men lived in New York's Bowery district in 1964. In 1960, Blumberg and his colleagues enumerated about 2,000 homeless persons living in the Skid Row area of Philadelphia. In each of the studies cited, actual counts were made of residents of hotels and rooming houses located within delimited areas of the cities in question.<sup>23</sup> Clearly, despite the post war economic expansion, homelessness still persisted in the 1950s and 1960s. America's Skid Rows may have been dying out: if so, the death agony was a prolonged one.

It should be noted that the meaning of homelessness, as used in the 1950s and 1960s was somewhat different from the current usage of the term which is more directly tied to absolute lack of housing and/or to living in shelters expressly provided for homeless persons. In the 1950s and 1960s homelessness was equated with living alone outside family units and in poverty. To study homelessness under that meaning meant to study persons living in Skid Row accommodations -- the flophouse hotels, SRO hotels and the mission dormitories.

Almost all of the Chicago homeless men studied by Bogue in 1958 had shelter of some sort: Four out of five rented windowless cubicles in flophouse hotels. The cubicles they rented for between \$ 0.50 and \$ 0.90 per night hardly fit any definition of home. They were called rooms by the flophouse hotel managers but in fact were partitioned off spaces in former factory lofts typically measuring five feet by seven that could hold a cot and little more. Light was minimal: the cubicles were each lit by a dim bulb. The partitions did not extend to the ceiling or to the floor, with wire mesh filling the gaps to provide security and ventilation. Most of the remainder of the homeless lived in cheap SRO hotels that had private rooms or in the mission

---

<sup>22</sup>Obtaining a special tabulation from the 1950 Census of all persons in Chicago living in hotels, rooms, or motels, Bogue reports that there were about 20,000 such persons in all of Chicago. The discrepancy between his and the Census counts may have reflected a 1950 to 1958 decline in the number of homeless persons, measurement error arising out of the fact that persons living in quite comfortable circumstances in luxury residence hotels are included in the Census tabulations, or some dispersion of homeless persons in areas outside of the identified Skid Row areas. We suspect that this discrepancy is a function of all three, with the dispersion factor likely being the major reason.

<sup>23</sup>The Philadelphia Census was conducted by enlisting the aid of the entire junior class of Temple University's medical school. Medical students dressed in their white interns' coats, dangling a stethoscope, knocked on every door in Philadelphia's Skid Row neighborhood and conducted the census.

dormitory shelters. Bogue reported<sup>24</sup> that a few, about 110, of the homeless men lived out on the streets, sleeping in doorways, under bridges, and other quasi-protected places.

Similarly, Blumberg found that a majority of Philadelphia's two thousand homeless lived in cubicle hotels and in the mission shelters. Only 64 persons were found<sup>25</sup> sleeping in the streets in his survey that searched the streets, hotels and boarding houses of Philadelphia's Skid Row area in 1960.

Municipal police departments and jails also provided shelter to the Skid Row residents. On any given night, many of the Skid Row homeless were given shelter in police stations and local jails, after arrests for public drunkenness or other status crimes. Before the decriminalization of public drunkenness in 1966, large proportions of the total arrests in large cities -- over 25% in New York -- were for this and related offenses. Chicago's jails and police stations literally accommodated several hundred Skid Row residents each evening.<sup>26</sup>

As described by Bogue, the median age of Chicago's homeless was close to 50. More than 90% were white. About a quarter were social security pensioners, making their monthly \$30-\$50 minimum social security payments last through the month by renting the cheapest accommodations possible. The other three-fourths either earned their livelihoods through employment or had small relief payments under General Assistance.

---

<sup>24</sup>Based upon interviews with homeless men in the local public library reading room where men sleeping out on the streets were reputed to congregate during the day.

<sup>25</sup>Blumberg enlisted the aid of medical students at Temple University's Hahnemann Medical School to canvass all of the streets and residential structures in Philadelphia's skid row. The survey was conducted over a 24 hour period with all persons encountered being interviewed. Token payments of \$0.25 and \$0.50 were given those who responded, the larger sum going to persons submitting to a more lengthy interview.

<sup>26</sup>Bogue's count is about 400 persons in jails, hospitals and sleeping out on the streets. Since he later estimates about 100 nightly sleeping on the streets, the remaining 300 were apparently to be found in hospitals or in jails. Researchers on the Skid Rows before decriminalization of public drunkenness remark on the custom of the police to cruise Skid Row streets arresting men sleeping on the streets or acting visibly intoxicated. An arrest resulted in at least one night spent in jail and possibly a sentence for a jail stay of a week or more, especially for repeat offenders.

As in the 19th Century, urban Police Departments functioned as a major provider of housing for the homeless.

Aside from those who lived on their pension or General Assistance checks, most Skid Row inhabitants earned their living through menial, low paid employment, much of an intermittent variety. The mission dormitories and municipal shelters provided food and beds for those out of work or who could not work. In the opinions of Skid Row residents, the mission dormitory sleeping accommodations were the least desirable living conditions available, lacking privacy and safety, and usually requiring attendance at evangelical religious services.

At the time, the social researchers discerned clear signs that the Skid Rows were disappearing. Caplow and Bahr claimed that the population of the Bowery had declined from 14,000 in 1949 to 8,000 in 1964, a trend that would lead to the disappearance of Skid Row by the middle of the 1970s. Bogue cited high vacancy rates in the cubicle hotels as evidence that Chicago's Skid Row was on the decline. In addition, Bogue claimed that the economic function of Skid Row was fast disappearing. With the mechanization of many low skilled tasks, the spot labor market was shrinking.

Indeed, for quite a while it looked as if the forecasted decline was occurring. Studying population trends in the Skid Row areas of 41 cities<sup>27</sup> through successive censuses, Barrett Lee (1980) found that the Skid Row populations had declined by 50% in the period between 1950 and 1970. Furthermore, in cities where the market for unskilled labor had shrunk the most, the Skid Row populations had correspondingly declined the most.

By the middle of the seventies, striking changes had taken place in city after city. Many of the flophouse cubicle hotels had been demolished, replaced initially by parking lots and later by office buildings and apartment complexes for young professionals. The collection of cheap SRO hotels, where the more prosperous of the old homeless had lived, also had been seriously diminished in number.

Although the long established Skid Rows had shrunk and in some cases been almost obliterated, urban Skid Rows did not disappear altogether: in most places, the missions still

---

<sup>27</sup>These were the same cities studied by Bogue and used the same definitions of what were Skid Row areas in those cities.

remained<sup>28</sup> and smaller Skid Rows sprouted up in several places throughout the cities where the remaining SRO hotels and rooming houses still stood.

In the 60s and 70s the demand for very cheap accommodations for the old age pensioners documented by both Bogue and Caplow and Bahr in their studies declined. The elderly extremely poor had declined in number as the coverage of the Social Security old age pension system increased to include more of the labor force and after Congress in the 1960s voted more generous benefits for those who had been working all their lives under its coverage. In 1974, the Social Security old age benefits were pegged to the cost of living index, assuring that the high inflation rates of the 1970s would not wipe out the value of their benefits. In addition, subsidized senior citizen housing, our most popular public housing program, began to provide affordable accommodations to the elderly. This increase in the economic well being of the aged is most dramatically shown in the remarkable decline of proportions of the 65 and over who were below the poverty line: from 25% in 1968 to less than 13% in 1985, with the most precipitous decline of 9% in the three year period between 1970 and 1973. The consequence of these changes was that a large portion of those who might have been residents of the 1950s-style Skid Row population disappeared in the 70s into the more general housing stock.<sup>29</sup> Higher benefits and subsidized housing made it possible for the aged pensioners successfully to obtain modest housing. In addition, more generous benefits were available for the physically disabled and the chronic mentally ill through an expanded SSI and SSDI program, enabling this group to move up in the housing market.

The old homeless may have blighted some portions of the central cities but, from the perspective of urbanites, this pattern had the virtue of being concentrated in Skid Row, an urban

---

<sup>28</sup>Pacific Garden Mission, one of Chicago's oldest and largest missions, is still located at the same address as in 1958. When studied by Bogue, it was surrounded by exceedingly shabby buildings consisting of cubicle hotels, pawnshops, inexpensive restaurants and cheap bars. When last visited by the author in 1989, it was surrounded by a considerably upgraded neighborhood with only one of the SROs still functioning.

<sup>29</sup>The age structure of the 1950s and 1960s Skid Rows made changes rapidly evident. The elderly residents of those times were mostly dead by the end of the 70s. The changes in the social security system benefitted primarily those who retired since 1970.

feature small enough to avoid and hence ignore. It is important to note that the most of the old homeless on the Skid Rows had some shelter, although inadequate by any standards, and that very few were literally sleeping on the streets.

Indeed, in those earlier years, if any had tried to bed down on the steam vents or in the doorways and vestibules anywhere in the city, police patrols would have bundled them off to the jails. The subsequent decriminalization of many status crimes, such as public inebriation or vagrancy -- and decreased emphasis on the use of charges such as loitering has enlarged the urban turf to which homeless persons can lay claim.

Homelessness began to take on new forms by the end of the seventies. Although all of the researchers found a few sleeping out on the streets or in public places in the 1950s and 1960s, homelessness by and large meant unattached (i.e. unmarried) persons living in very inexpensive (and often inadequate) housing, mainly cubicle and SRO hotels. Toward the end of the seventies, what had been a minor form of homelessness in the earlier period became more prevalent: the pattern of sleeping out on the streets or in public places - literal homelessness - began to grow and at the same time become more visible to the public. It became more and more difficult to ignore the evidence that there were some persons who had no shelter and who lived on the streets. The "new" homeless could be found resting or sleeping in public assembly places such as bus or railroad stations, sleeping on steam grates, in doorways and vestibules, in cardboard boxes, in abandoned cars or in other places where they could be seen by the public.

In addition, whatever bizarre behavior may have been characteristic of the old homeless of the 1950s and 1960s, that behavior was acted out on Skid Row.<sup>30</sup>

Now the public could observe at first hand shabbily dressed persons acting in bizarre ways, muttering, shouting, or carrying bulky packages or pushing supermarket carts apparently filled with junk and old clothes.

Even more striking was the appearance of women in significant numbers among the

---

<sup>30</sup>Bahr and Caplow mention that 1960s tourist bus tours of New York advertized as visiting New York's famous "sights" regularly included a visit to the Bowery with the tour guide pointing out the "scenes of depravity" that could be viewed safely from the bus.

homeless. Shabby and untidy women began to be seen shuffling along the streets with their proverbial shopping bags or nodding sleepily in bus stations. What few homeless women there were in the 1950s and 1960s seemingly must have kept out of sight.

Although homeless families rarely showed up walking on the streets, they began to appear at the offices of welfare organizations asking for help in obtaining shelter. When homeless families began to come to the attention of the mass media and to show up in television clips and news articles, public attention grew even stronger and sharper.

Reminiscent of the Dust Bowl migrants of the Great Depression, stories began appearing in the newspapers about families migrating from the Rust Belt cities to Sun Belt places. The points of resemblance were striking. The family breadwinner has lost his job in an industrial factory and, after weeks of fruitless search for employment in one or another mid-American city, loaded household possessions and families into old cars, driving to Houston or Phoenix in search of the employment opportunities reputed to be found in the booming Sun Belt.

Popular response to the new homeless grew as the evidence of homelessness grew. In a celebrated 1979 New York case,<sup>31</sup> public interest lawyers sued the city claiming that New York had an obligation to provide shelter to homeless men. The victory of the public interest lawyers in New York led to an expansion of a network of "emergency" municipal shelters in that city which currently provides 6,000 beds nightly, almost entirely in dormitory quarters. Subsequent court decisions have extended New York City's shelter obligations to include homeless women.

The new "emergency shelters" that have been provided in city after city are certainly better than having no roof at all over one's head. However, a case can be made that in some respects the old cubicle hotels were better. The mens' shelters that were established in New York in the last decade resemble in physical layout the dormitory accommodations provided by

---

<sup>31</sup>The case in question, *Callahan v. Carey*, was filed in the New York State Supreme Court in 1979 by Robert Hayes, then Director of the New York Coalition for the Homeless. The suit claimed that the state constitution and municipal charter stated that shelter was an entitlement. Shortly after the case was filed, the court issued a temporary injunction requiring the city to expand the capacity of municipal shelters. When the case came to trial in 1981, it was settled by a consent decree in which the city agreed to provide shelter upon demand.



the missions in the old Skid Row, accommodations that the old homeless regarded as last resort alternatives to sleeping outside. In social organization, these shelters resemble most closely minimum security prisons, whose gates are open during the day.

As reported in a survey of New York shelter clients (Crystal and Goldstein, 1982), the shelter residents rated prisons as superior to shelters in safety, cleanliness, and food quality. The shelters were regarded by users as clearly superior only in freedom, meaning the right to leave at any time.

The housing provided for homeless single women in New York was somewhat better than that supplied to men. The single women's shelters resembled most closely the old cubicle flophouses with their cramped individual accommodations. The new homeless were clearly worse off in regard to shelter than the old homeless.

New York is exceptional in that the municipal government has directly provided most of the shelters for the homeless. In most other cities, private charities with government subsidies usually provide the shelters. The long established religious missions, for example, the Salvation Army, the Volunteers of America, and the Society of Saint Vincent de Paul, expanded their existing shelters and, in some instances, undertook to run shelters under contract to municipalities or states. Other charities provided shelters for the first time.

In Bogue's 1958 study, the four or five mission shelters provided only 975 beds for the homeless of Chicago in contrast to the 45 shelters we found in the winter of 1985-6 in that city, providing a total of 2,000 beds.

To accommodate the influx of family groups into the homeless population, new types of sheltering arrangements have come into being. Some shelters specialize in providing quasi-private quarters for family groups, usually in one or two rooms per family with shared bathrooms and cooking facilities. In many cities, welfare departments have provided temporary housing for family groups by renting rooms in hotels and motels. In some cities, the provision of hotels and motel rooms for homeless families is on a fairly large scale: For example, in 1986, New York's

welfare department monthly provided for 3,500 families in so-called welfare hotels<sup>32</sup> (Bach and Steinhagen, 1987).

Reversing the declining trends discerned in the 1960s, there can be little doubt that homelessness has increased over the past decade and that the composition of the homeless has changed dramatically. There are ample signs of these changes. In the few cities where data over time exists, there is clear evidence that the numbers of homeless are increasing at least in some localities. In New York City, shelter capacity has increased from 3,000 to 6,000 over a five year period. In the same city, the number of welfare families in the welfare hotels has correspondingly increased from a few hundred to the 3,500 of 1986. In addition, there are those homeless who do not use the shelters, a portion of the homeless population that may be large but whose size is not known with any degree of precision.

As we have seen in Part II, approximately 56 empirical social science studies of the homeless have been undertaken since 1980. As a consequence, a fairly clear understanding is now emerging concerning who are the new homeless, how they contrast with the general population and how they differ from the old homeless of the 1950s.

Some of the important ways that the current homeless differ from the old homeless have already been mentioned. Bogue estimated that only about 100 homeless men in 1958 slept out on the streets. Caplow and Bahr make some passing mention of the Bowery homeless sleeping out on the streets or in public places in 1964, but their lack of attention to this feature implies that such numbers were small. Blumberg's study of Philadelphia uncovered only 64 homeless persons living out on the streets in 1960. In stark contrast, studies (Rossi, 1989) of homelessness

---

<sup>32</sup>An ironic feature of the use of welfare hotels is that the rents paid by the welfare departments for these accommodations are clearly magnitudes greater than current rents at the lowest end of the housing market. The welfare payments are not enough to pay market rents, but the welfare departments find it possible to pay rents for homeless clients that are much higher than market rents for apartments!

in Chicago found close to 1400 homeless persons out on the streets in the Fall of 1985 and 528 in that condition in the dead of the Winter in early 1986. Comparably large numbers of street homeless, proportionate to community size, have been found over the last five years in studies of, among others, Los Angeles, New York, Nashville, Austin, Boston, Baltimore, and Washington, DC.

A major difference between the old and the new is that the old homeless routinely somehow managed to find shelter indoors while a majority (or close to a majority) of the new homeless in most 1980s studies are out on the streets<sup>33</sup>. As far as shelter goes, the new homeless are clearly worse off than the old. In short, the problem of homelessness today is a condition of more severe basic shelter deprivation.

There is also some evidence that the homeless when housed in emergency shelters may be worse off with respect to shelter than the homeless who lived in the cubicle hotels of the 1960s. Whatever may have been the acknowledged faults and deficiencies of the cubicle hotels, they were a step above the dormitory arrangements being provided in the new shelters of the 1980s and certainly considerably better than sleeping out on the streets or in public places.

Furthermore, the new homeless, sheltered or out on the streets, are no longer concentrated in one Skid Row. They can be encountered more widely throughout the downtown areas of our cities. Homelessness is a problem that can not be easily ignored today, as it could have been in the past. In the expectation that homelessness was on the decline, much of the traditional Skid Row areas was demolished, with the consequence that homelessness was decentralized. In addition, the liberalization of police patrol practices in many cities has meant that the homeless can wander more freely through our downtown areas. The consequences are that the public receives higher levels of direct exposure to the sight of extreme destitution.

A second major contrast concerns the presence of women among the homeless. In Chicago's Skid Row, Bogue estimated that women may have constituted up to 3% of the

---

<sup>33</sup> The ratios of street to shelter homeless when presented have all been greater than 1, as shown in homeless studies for Boston, Phoenix, Washington, Chicago and Nashville.

residents, and was of the opinion that many of them were not homeless but simply living in the Skid Row areas.<sup>34</sup> As reported by Bahr and Garrett (1976), homeless women on the Bowery in the 1960s constituted a small handful. Indeed, in order to find a sufficient number to study, the authors took the total population of women ever resident over the period of a year -- 64 - in a special supported shelter for homeless women.<sup>35</sup>

In contrast, we found that women constituted 25% of the 1985-1986 Chicago homeless, close to the average of 22% calculated for all 56 studies of the homeless conducted during the 1980s. All of the studies undertaken in the 1980s have found women to constitute a much larger proportion of the homeless than the studies of the old homeless undertaken before 1970. The proportion female among the homeless varies somewhat from place to place: if women living in the New York Welfare hotels are counted as homeless, then the homeless women of New York constitute close to one third of those in shelters or welfare hotels<sup>36</sup>. In contrast, a study of the homeless of Austin, Texas found only 7% to be women, certainly a smaller proportion than in New York, but clearly greater than was found in any of the older Skid Row studies.

A third contrast with the old homeless is provided by the age composition of the homeless. There are relatively very few persons over 60 among today's homeless and virtually no social security pensioners: On the average, 9% of the homeless were age 60 or older. Instead today's homeless are concentrated in their 20s and 30s, adults in the early years of adulthood. This is clearly shown in the median age of today's Chicago homeless, 39, in comparison to the median age of 50 found in Bogue's study. In the 56 other homeless studies

---

<sup>34</sup>Bogue did not interview any women in his sample of cubicle hotel and SRO residents. His estimate of 3% comes from a special tabulation from the 1950 Census of persons living outside of households in Skid Row Census tracts. Bogue believed that some of the women were live-in employees of the cubicle management and others were simply renting rooms in households that lived in conventional dwelling units in the Skid Row areas.

<sup>35</sup>In their study of homeless women, they took as subjects every person admitted to a Bowery treatment center for alcoholic women. It took an entire year's set of admissions to supply 64 subjects for their study.

<sup>36</sup> Women constitute a smaller proportion of all homeless, but since the size of the New York homeless population living on the streets or in public places is unknown, the overall proportion female in the total New York homeless population is unknown.

conducted in the last few years, the average median age recorded was 36, with a range running from 30 through 43. Where we have data over time, as in New York City men's shelters, the median age has been dropping rapidly over the past decade.

A fourth contrast is provided by employment status and income: Except for aged pensioners, over half of the old Chicago homeless studied in 1958 were employed in any given week, either full time (28%) or on an intermittent part time basis (25%) and almost all were employed for some period during a year's time. In contrast, among the new Chicago homeless of the mid 1980s, only 3% reported having a steady job, while a total of only 39% worked for some time during the previous month. Although the reference time periods of the two studies are different, it is clear that half working in any one week is a higher employment rate than two in five over the period of a month.

Correspondingly, the new homeless have less income than the old had. Bogue estimated that the median annual income of the 1958 homeless was \$1,058. Our Chicago finding was a median annual income of \$1,198<sup>37</sup>. Correcting for the intervening inflation, the annual income of the Chicago homeless in the winter of 1985-86 is equivalent to only \$383 in 1958 dollars. The new homeless are clearly further out on the fringe of the American economy than were the old homeless: The incomes of the new homeless are less than a third of that of the old homeless!

A final contrast is presented by the ethnic composition of the new and old homeless populations. The old homeless were predominantly white -- 70% on the Bowery and 82% on Chicago's Skid Row. But the new homeless are heavily recruited from among ethnic minorities: In Chicago 54% were blacks, and in New York's shelters more than 82% were black or Hispanic, a proportion that has been increasing since the early 80s. Similar patterns are shown in other American cities with the minority group in question changing according to the ethnic mix of the general community population. In short, the generalization can be made that minorities are consistently over-represented among the new homeless in ratios that are some multiple of their presence in the community. The old homelessness was more blind to color and ethnicity

---

<sup>37</sup> Similar income levels -- average median annual income was \$1,248 -- were found in the 14 studies of the 1980s that attempted to measure income.

than the new homelessness.<sup>38</sup>

There are also some continuities from the old to the new homeless:

First of all, both the old and the new homeless share the condition of extreme poverty. Although the new homeless are lower on the economic ladder than the old, there can be little doubt that both the old and the new have incomes that are far below what could or can support any reasonable standard of living in their respective historical periods. In Chicago in 1985 and 1986, we found abysmally low incomes among the homeless. With median incomes of less than \$100 per month or about \$3.25 per day, even trivial expenditures loom as major expenses: For example, a round trip on Chicago's bus system cost in 1986 \$1.80, or more than half a day's income. A night's lodging at even the cheapest hotels costs \$5.00 and up, more than a day's income. And, of course, a median income figure simply marks the income received by persons right at the midpoint of the income distribution: Half of the homeless live on less than the median and close to one fifth (18%) reported no income at all. In addition, the income of the homeless is not a steady stream of \$3.25 each and every day. Rather the income flow is *intermittent and unpredictable*, meaning that for many days in the week, weeks in the month and months in the year, many of the homeless have no income at all.

Given these income levels, it is no mystery why the homeless are without shelter: Their incomes simply do not allow them to enter effectively into the housing market. Indeed, the only way the homeless can get by is by looking to the shelters for a place to sleep, to the food kitchens for meals, to the free clinics and emergency rooms for medical care, and to the clothing distribution depots for something to put on their backs.

The new and the old homeless also are alike in having high levels of disability. The one change from the 1950s to the 1980s is in the lowered presence of the disability of being aged. As mentioned earlier few of the new homeless are over 60. The current homeless suffer from much the same levels of mental illness, alcoholism and physical disability as the old

---

<sup>38</sup>Blumberg speculated that the black homeless men in the Philadelphia of 1960 were kept out of Skid Row by the discriminatory practices of cubicle hotel landlords, and had to be absorbed into the black ghetto areas in rented rooms and boarding houses. He predicted that the proportion black would rise in the future.

homeless.

Much has been written asserting that the deinstitutionalization of the chronically mentally ill during the 60s and 70s is a major cause of the recent rise in homelessness. Almost as much has been written denying that such was the case. At this point in time, it is almost pointless to try to determine whether one side or the other in this controversy is correct, either largely or in part. The decanting of the mental hospital population occurred throughout the 1960s and its current effects in any event have long since been diluted through the passage of time. What is important right now are the current admissions policies of our mental hospitals. Many of the chronically mentally ill homeless are persons who would have been admitted two decades ago under the then existing practices. The shelters and the streets now substitute in part for the hospitals of the past.<sup>39</sup>

It is also important to keep in mind that the old Skid Rows were not free of the chronically mentally ill. All of the researches of the 1950s and 1960s remark on the presence of clearly psychotic persons in the flophouses of Chicago and New York. Bogue estimated that about 20% of the Skid Row inhabitants were mentally ill. Blumberg found that among the 1960 Philadelphia homeless, 16% had been hospitalized at least once in a mental institution. Chronic mental illness seemingly has always been a significant presence among the homeless. Skid Row with its easy acceptance of deviance of all sorts certainly did not draw the line at chronic mental illness.

Because of the attention paid to deinstitutionalization as a possible contributory factor in homelessness, researches on the new homeless almost invariably attempt to estimate the prevalence of chronic mental illness among the homeless. A variety of measures have been employed with the surprising outcome that they tend to converge: A fair summary is represented

---

<sup>39</sup>In 1958, the Municipal Court that had jurisdiction over Chicago's Skid Row area had a psychiatrist on its staff whose function it was to recommend commitment to mental hospitals for Skid Row residents judged to be psychotic who were brought before the Court. Bogue suggests that this screening process lowered the proportion of Skid Row residents he found to be psychotic. A 1934 study by Sutherland and Locke of emergency municipal shelters for homeless men describes a psychiatric screening process in admission that shunted the clearly psychotic men to the mental hospitals.

Current shelter practices in Chicago often involve refusing admission to persons behaving in a bizarre manner. Currently, the clearly psychotic are left to sleep on the streets.

by the following average percentages; 24% reporting previous episodes as mental hospital patients and 33% showing signs of current psychosis or affective disorders. (These two conditions overlap and are not additive.) Although the reported current prevalence of chronic mental illness among the new homeless appears to be more than fifty percent higher than what prevailed among the old, differences in measurement procedures used may account for that difference. In any event, compared to the general population both levels are extremely high.

Physical disabilities also are prevalent among the new homeless. The best evidence on this score comes from the medical records of the Robert Wood Johnson Foundation supported medical clinics for the homeless which document high levels of both chronic conditions, such as hypertension, diabetes, and circulatory disorders, and acute conditions, some integrally related to the homeless condition, such as lice infestation, trauma, and leg ulcers (Wright and Weber, 1988). The few studies that looked into mortality rates among the new homeless found rates from 10 to 40 times those found in the general population.

Unfortunately none of the studies of the older homeless provide any comparable detail on medical conditions, although all of the researches remark on the presence of severe disabilities. Bogue did judge that close to half of the 1958 Skid Row had moderate to severe disabilities that would reduce substantially their employability. His studies of mortality among the 1958 homeless found much the same mortality levels as has been found among the new homeless, namely mortality rates that are over ten times higher than among comparable age groups in the domiciled population.

All of the studies of the old homeless stress how widespread the prevalence of alcoholism was. Bogue found that 30% were heavy drinkers, defined as persons spending 25% or more of their income on alcoholic beverages and drinking the equivalent of 6 or more pints of whiskey per week. Using a comparable measure, Bahr and Caplow found 36% to be heavy drinkers. Similar proportions were found in Minneapolis and Philadelphia around the same time.

Studies of the new homeless show similar degrees of prevalence of alcoholism. In our Chicago study, 33% had been in a detoxification unit, indicating that one in three had had serious problems with alcohol. Studies in other cities produced estimates of current alcoholism averaging 33%, with a fairly wide range. The consensus of the studies is that about one in four



(26%) of the new homeless are chronic alcoholics.

A new twist on substance abuse among the homeless is the presence of drug usage. None of the studies of the 1980 homeless has attempted to measure drug abuse in a satisfactory way, but all point to the significant presence of drug abuse, past and present, among the new homeless. Recent studies of the homeless in New York men's shelters claim that about 20% of the homeless men were current hard drug users or had been addicted in the past.

Another point of comparability between the old and the new homeless concerns the heterogeneity of both populations. Both the old and the new homeless populations were composed of some persons who remained homeless for only short periods of time and of others who were homeless for long periods of time. The Skid Rows were points of entry for poor migrants to urban centers who rented cubicle hotel accommodations until they had established themselves and could afford conventional dwelling units. The short term new homeless are somewhat different, being poor persons whose fortunes have temporarily taken a turn for the worse and who find the shelters a good way to cut back on expenses until they can re-establish themselves.<sup>40</sup> A large portion of the temporary new homeless consists of young female headed households in transition from one household (often their parental households) to another, using the shelters as a resting place until they can establish a new household on their own, often while waiting for certification as AFDC recipients.

A final point of comparability between the old and the new homeless is that both the old and the new are relatively socially isolated. The new homeless report few friends and intimates, and depressed levels of contact with relatives and family. There are also signs of some friction between the homeless and their relatives. So extensive was the absence of social ties with kin and friends among the old homeless that Caplow and Bahr define homelessness as

---

<sup>40</sup>In many housing markets it is necessary for a prospective renter to have on hand enough cash to put down a month's rent in advance plus a security deposit in order to rent an apartment. Thus for an apartment renting for \$400 per month, as much as \$800 may be needed simply to be in a position to make an offer for that apartment. If we also consider that some minimum amount of furniture may also be necessary, setting up a new household in a rental apartment may require cash on hand exceeding \$1,000. Although few researchers have provided any firm numbers, several have remarked on shelter dwellers who are fulltime employed and using the inexpensive shelter accommodations as ways of accumulating the cash on hand necessary for entry into the conventional rental market.

essentially a state of disaffiliation, without enduring and supporting ties to family, friends, and kin. Disaffiliation also characterizes the new homeless, a condition that marks this group off from other extremely poor persons.

The contrasts between the homeless of the 1950s and 1960s and the homeless of the 1980s provides some strong clues as to why homelessness has become defined in current times as a major social problem. First, there can be no doubt that more Americans are exposed to direct sight of homelessness because homeless persons are less spatially concentrated today. Secondly, homelessness has shifted in meaning: the old homeless were sheltered in inadequate accommodations, but they were not sleeping out on the streets and in public places in great numbers. Literal on-the-street homelessness increased from virtually negligible proportions to more than half of the homeless population. Literal homelessness of the most severe variety is clearly present and affecting significant numbers of people. Third, the condition of homelessness has become one of greater deprivation than in the past. The homeless men living on Skid Row were surely poor but their average incomes from casual and intermittent work were three to four times that of the current homeless. The emergency shelter housing available currently to homeless people is at best only marginally better than the cubicle rooms used by the homeless of the past.

Finally, the composition of the homeless has changed dramatically. Thirty years ago, old men were the majority among the homeless with only a handful of women in that condition and virtually no families. The current homeless are younger and have a significant proportion of women. There are homeless families now, mainly composed of unattached women and their children. Finally, advocate organizations and groups have arisen to speak on behalf of the homeless and to maintain a high level of public consciousness of the homeless problem.



#### PART IV: Estimating the Number of the "Precariously Housed"

Definitional issues plague both proper conceptualization of homelessness and its measurement. As we have seen in Part III, the implicit definition of homelessness has changed at least once in the last forty years. There are many connotations to the key word "home" that is at the center of the concept of homelessness: The Oxford dictionary devotes three full pages to the word "home" and its direct derivatives, most of the meanings involving connotations of comfort, ease, safety, love, closeness and other positive attributes of family and intimacy as well as meaning implying some physical structure used as housing.

It can hardly be startling that a major definitional issue centers around whether "home" in homelessness means customary access to housing, as afforded by ownership or renting, or something more, possibly including meeting minimum standards concerning privacy, space, amenities, location and all the other housing attributes that index housing quality. In short, the controversy centers around how much of the broad meaning of home should be incorporated by negation into the concept of homelessness.

Compounding the definitional problem in conducting social research on homelessness is the ease of implementing narrow definitions and the great difficulty of using broader definitions: That is, definitions that identify those living on the streets and in the shelters as the homeless are easier to use in research than broader definitions that include notions of housing standards. As a consequence, the persons studied in the 56 empirical studies cited in Part II are primarily the easily identified clients of homeless serving agencies, such as emergency shelters, food kitchens, or medical clinics, and/or persons encountered using public spaces as housing,

such as train stations, lobbies, and abandoned buildings.

In an effort to organize thinking about this definitional issue, we have elsewhere (Rossi, 1989) suggested that a useful distinction might be drawn between the "literal homeless" and the "precariously housed". The term "literal homeless" includes all persons who do not have access freely to a conventional housing unit and who therefore use either shelters or public places in which to sleep. In practice "literal homelessness" covers the homeless who have been studied in the 56 researches reported in Part II. The "precariously housed" include persons and families who have some claim on the use of conventional housing but that claim is threatened by the financial position of the persons in question or because the housing is occupied with the consent of whoever owns or rents that housing. The precariously housed include those extremely poor living doubled up in housing owned or rented by others, and extremely poor persons whose income is insufficient to permit their steady and unquestioned access to conventional housing. This includes extremely poor people living doubled up with others or in flophouses, SROs or boarding houses.

Clearly there is a close connection between the literal homeless and the precariously housed. The precariously housed are the reservoir from which the literal homeless are drawn. It is not likely that a person or a family passes abruptly from being securely housed to being literal homeless, but rather goes through a period in which holds on housing become increasingly precarious. As shown in several researches (Sosin et al, 1988; Burt and Cohen, 1988; Farr, Koegal and Burnham, 1988) there are "parttime" homeless, persons whose steady income can cover rents for an SRO room only for a few weeks every month, forcing shelter residence for a week or so every month. Other poor persons can retain their hold on housing only by using the agencies set up to serve the needs of the homeless to provide amenities that *their income will*

not afford once their rent has been paid; The cited researches found that large proportions of food kitchen users actually lived in conventional housing.

The precariously housed are part of what has been often called the "hidden homeless", a term that covers all the components of homelessness about which it is difficult to find out much from existing data sources. The precariously housed are difficult to study because they are "hidden" in among the housed.<sup>41</sup>

There are several obstacles that stand in the way of efforts to obtain information on the size and characteristics of the precariously housed:

First, although one of the salient characteristics of this group is their extreme poverty, that is not a very precisely known feature: What is the boundary that separates the extremely poor from all others? The federally defined poverty level is probably too high, since it is designed to cover the income needs of persons and families needed to maintain life at a minimum level of adequacy. The distinctive feature of extreme poverty is that it is a level of income that is below that minimum.

Second, the line is fuzzy between being a family member and being doubled up with another family. Young unmarried persons, between the ages of 18 and 21, whose personal incomes are essentially zero and who are attending schools are usually not considered to be doubled up when living with their parents, but married, employed persons of the same age

---

<sup>41</sup> The term "hidden homeless" is also used to cover literal homeless persons whose sleeping places are so well hidden and concealed (e.g. in abandoned buildings, in the sub-basements of public buildings) that it is not likely that any social researcher can reach them for enumeration or interview.

range in comparable housing arrangements would be regarded as doubled up. At issue here is the ambiguity in American kinship about what are the conditions under which persons who are related in some way through kinship or friendship bonds owe obligations to take each other into their homes as household members. Certainly there is no ambiguity either in family law or in kinship norms about the obligation of parents freely to admit their children under 14 into their homes, and likely that obligation extends to unmarried teenagers. Where in the life courses of their children such obligations end is ambiguous along with the effects of children's marital or disability statuses on such obligations. Furthermore, although it is clear that friendship bonds do not impose strong obligations to share dwellings beyond very short term arrangements, it is not clear whether the grandparent-grandchild bonds, the bonds among siblings or the bonds between more distant kin are stronger or weaker than those between friends or how much weaker those ties are than the bonds between parents and children.

#### Using the Current Population Survey to Estimate the Precariously Housed

For the reasons enumerated in the last section there can be no definitive attempt to estimate the size of precariously housed. The estimation efforts we will describe below are attempts to do the best we can. Because of the fuzziness of the definitions of family member and of extreme poverty, we will present several estimates, each based on varying the operational forms of those definitions.

The data bases used in these estimates are the public use data files of the 1988 and 1970 Current Population Surveys (CPS). The 1988 CPS was chosen because it was the latest

available. The 1970 CPS was used because it is the earliest available<sup>42</sup> and was taken before the present surge in homelessness.

The Current Population Survey is a large, national survey of households, based on an area probability sample of the civilian, non-institutionalized population of the United States who are living in conventional housing units and in "group quarters"<sup>43</sup>. The 1970 CPS is based on 35,000 households and the 1988 CPS on 55,000. The surveys are undertaken in March. The income of each adult for the previous calendar year is collected along with data on the current household and work status: for example, in the 1988 CPS, annual income for 1987 is collected for each household member along with the March 1988 demographic composition of the household and current labor force activities of each household member. Note that this disjunction in time between the annual income we will use to define extreme poverty and current household composition causes some problems, as discussed below.

As discussed in Part II, a distinguishing characteristic of the homeless is their marital status. Consequently, we will restrict our attention to "unattached" (not currently married and, if married, not currently living with spouse) adults aged 22 to 59 who are not students and are not living on farms. We chose to focus on unattached persons because that condition matches that of all but a very small proportion of the literal homeless. Students are omitted because we believe that their incomes while students are temporarily depressed and not at all characteristic

---

<sup>42</sup> Although the CPS was started up in the late 1940s, only those conducted since 1970 have been released as public use tapes. Plans are under way to prepare the earlier years for release in the future.

<sup>43</sup> This coverage excludes persons living in transient quarters, such as hotels and motels or emergency shelters where occupancy is not ordinarily for periods longer than a week, in military barracks on military reservations, in hospitals, jails or prisons. Clearly, the CPS does not cover the literal homeless.



of their long term annual incomes. Unattached persons living on farms are left out because they may be family members who are unpaid farm workers whose money income is a distorted index of their economic position. Finally, the age range spans adulthood, but stops short of old age, the upper cutoff representing the age at which eligibility for social security benefits begins. In any event, we will vary the lower age limit to measure resulting effects on our estimates.

Because we are dealing with adults who are currently not sharing a household with a spouse<sup>44</sup>, we will use individual income to determine whether an individual is extremely poor, using fractions of the going poverty levels for that determination. The poverty level is defined for a family consisting of persons related by marriage or descent. In the case of unattached persons, this means that their poverty level amount varies with the number of minor children (defined as under 18) for whom an unattached adult may take responsibility. Note that this decision is based on the assumption that households made up of husbands and wives pool their separate incomes and that parents living with minor children share their income with their children by providing food, shelter, and other amenities.

#### Estimates of the Size of the Precariously Housed in 1987

Based on special tabulations from the 1988 CPS, Table IV.1 presents a set of estimates of the size of the extremely poor, based upon upper income limits that are 50% and 75% of current poverty levels and by setting several alternative age cut off points. The lowest estimate, 3,940,000 is obtained by setting the lower age limit at 25 and the poverty cutoff at 50% of the

---

<sup>44</sup> The CPS does not provide any indication of unmarried adults living together and sharing responsibilities for a household. As we will see, this lack of information may mean that we have over-estimated the number in extreme poverty to some extent.

poverty level. Lowering the lower age limit to 22 and using 75% of the poverty level yields the highest estimate, 8,053,000. Note that changing the lower age limits simply changes the assumptions made about the ages at which young people should be considered responsible for their own financial support.

Table IV.2 elaborates on two sets of estimates of the size of the extremely poor and their living arrangements, both estimates assuming lower age cutoff points of 22 but varying the income limits. The left two columns contain data on the extremely poor using the criterion of a 1987 income that was 50% or less of the defined poverty level. The right hand two columns use a cutoff of 75% of the defined poverty level. As shown in the bottom row of Table IV.2, using the 50% of poverty level definition, there are close to 5.5 millions (5,516,000) whereas using the 75% definition the resulting estimates are more than eight millions (8,053,000).

Note that the upper portion of Table IV.2 concerns single parents, persons who live with one or more of their own children. The bottom portion relates to single persons, persons living alone with none of their children present. This classification is so important that it will be used almost consistently throughout this portion of this paper.

TABLE IV.1: Sensitivity of Extreme Poverty Estimates to Varying Lower Age Cutoff Points and Income Ceilings: 1988 CPS

| ESTIMATED SIZE OF EXTREMELY POOR<br>(IN THOUSANDS)   |    |  |      |
|--|----|--|------|
| Lower Age of<br>Single Non-Parent<br>Parents Singles |    | Poverty Level<br>1987 Income Cutoff<br>50% 75% |      |
| 22   | 22 | 5516   | 8053 |
| 22   | 25 | 4923   | 7168 |
| 25   | 25 | 4696   | 6830 |
| 25   | 30 | 3940   | 5786 |

TABLE IV.2: Estimates of The Precariously Housed Based on the 1988 CPS: Unattached Persons, 22 to 59, Non-Students, Non-Farm, Under Varying 1987 Income Cutoffs

|                                   |        | 50% of Poverty<br>Level or Less |              | 1987 INCOME<br>75% of Poverty<br>Level or Less |              |
|-----------------------------------|--------|---------------------------------|--------------|--|--------------|
| March 1988 Living<br>Arrangements | (000s) | Number                          | %<br>(000s)  | Number   | %            |
| I: Single Parents                 |        |                                 |              |  |              |
| Alone - children<br>under 18      |        | 1511                            | 27.4         | 2284   | 28.4         |
| Alone - children<br>over 18       |        | 247                             | 4.5          | 353  | 4.4          |
| With parent(s)                    |        | 312                             | 5.7          | 410  | 5.1          |
| With other relatives              |        | 60                              | 1.1          | 90   | 1.1          |
| With non-relatives                |        | 115                             | 2.1          | 164  | 2.0          |
| SINGLE PARENT TOTAL               |        | <u>2245</u>                     | <u>40.8</u>  | <u>3301</u>                                    | <u>41.0</u>  |
| II: Single Persons - No Children  |        |                                 |              |  |              |
| Alone                             |        | 653                             | 11.8         | 1097   | 13.6         |
| With parents                      |        | 1532                            | 27.8         | 2115   | 26.3         |
| With other relatives              |        | 934                             | 16.9         | 1278   | 15.9         |
| With non-relatives                |        | 152                             | 2.7          | 261  | 3.2          |
| SINGLE PERSONS TOTAL              |        | <u>3271</u>                     | <u>59.2</u>  | <u>4751</u>                                    | <u>59.0</u>  |
| GRAND TOTAL                       |        | <u>5516</u>                     | <u>100.0</u> | <u>8053</u>                                    | <u>100.0</u> |

It is important to understand in dollar terms what these income cutoffs represent: Either cutoff describes people clearly living in conditions that almost everyone would agree is extreme poverty in America. Under the 50% cutoff, a single person's upper income limit is \$3,000, or \$250 monthly, or less than \$60 per week. The income cutoff points for single parents are higher depending on the number of minor children involved; for example, for a single parent with 2 children the 50% cutoff point is \$6,000, amounting to \$500 per month or about \$120 per week.

The upper income limits, discussed above, are used as criteria for inclusion; Most people who fall into the extremely poor group by our criteria are below these upper limits. Actual calculated average and median annual incomes are considerably lower, \$1,570 and \$1,410 or \$130 and \$118 monthly, respectively.

It would be useful to know what rentals are being charged on the bottom tiers of the housing market for accommodations appropriate for the precariously housed. As a rough index, we can refer to the fact that average monthly SRO rentals in Chicago in 1985 were about \$200 and in Los Angeles in 1988, \$250. If those rentals are characteristic, there is simply no way that the average extremely poor person can pay the average rentals in the lowest tier of the open market. Furthermore, even if the Chicago and Los Angeles rentals were double the national average for such accommodations, most of the extremely poor could not afford them<sup>45</sup>.

---

<sup>45</sup> Nor are the extremely poor occupying subsidized housing: According to the CPS, about 10% are in households occupying public housing units and another 5% are in households receiving rent subsidies.

## The Living Arrangements of the Precariously Housed

The interior rows of Table IV.2 show the 1988 living arrangements of the extremely poor, shown separately for single parents (unattached persons living with their own children) and for single unattached persons (no children present in the household). A little more than two-fifths (41%) of the extremely poor were single parents under both the 50% and 75% cutoffs. Two out of three of the single parents were living in households alone with their children. (Surprisingly, a significant number -- 247,000 under the 50% cutoff -- of single parents were living with children who were all 18 or over<sup>46</sup>.) Few of the single parents (312,000 under the 50% cutoff) were doubled up in their parental households and even fewer were living with other relatives (60,000 under the 50% cutoff) or with non-relatives (115,000 under the 50% cutoff).

Single persons who were not living with children of their own constitute the majority (59%) of the extremely poor under either the 50% or 75% cutoffs, numbering 3.3 or 4.8 million, respectively. Slightly fewer than a half (47%) lived in their parental homes under the 50% cutoff (45% under the 75% cutoff). Only a fifth of the single persons live by themselves; Those not living with their parents are living with other relatives or with non-relatives.

If we consider all those not living alone as being doubled up with some other household, then about 3.1 million are doubled up under the 50% cutoff criterion (61%) and under the 75% cutoff 4.3 millions (53%) are doubled up. These doubled up estimates provide strong indications that the extremely poor manage to get along by being subsidized by others, a third by their parents, another 16% by other relatives, and 5% by friends (non-relatives). If their position among the housed is precarious, it is mainly because they have to rely on the good will and generosity of others for their housing.

## Household Incomes of the Extremely Poor

For those who are living doubled up, their own income does not provide a good indicator of the standard of living that they actually experience because some degree of sharing

---

<sup>46</sup> As we will show below this group tends to be considerably older than the other single parents, suggesting widows or widowers living with adult children.

likely occurs in almost all of the doubled up arrangements. A better indicator of actual living standards would be the total household income, pooling the incomes of all the adults (over 16) living together. Indeed, it looks as if extreme deprivation is not typical among those doubled up. As shown in Table IV.3, the pooled incomes of the households into which the extremely poor have been incorporated are not very much below the average for all American households. In short, doubling up presumably affords a standard of living that cannot be enjoyed on one's personal income alone.

Of course, in the case of persons living alone or only with their minor children, the household income in question is identical to the income of the extremely poor person. As might be expected these households' incomes are the lowest in Table IV.3: Single parents with minor children had an average 1987 income of \$4,897 under the 50% of poverty level income cutoff and \$6,015 under the 75% cutoff. Single persons without children had even less income \$953 under the 50% cutoff and \$2,132 under the 75%. Note that those single parents all of whose children were 18 or over had low incomes (\$12,434 and \$13,302) but higher than those with only minor children; Clearly, their children were employed and earning.

TABLE IV.3: Total Household Annual 1987 Income for Households of the Extremely Poor, Age 22-59, Non-Farm, Non-Student (1988 CPS)

| 1988 Living Arrangements     | Average Total Household Income |                   |
|------------------------------|--------------------------------|-------------------|
|                              | 50% poverty level              | 75% poverty level |
| I: Single Parents            |                                |                   |
| Alone with minor children    | \$ 4897                        | \$ 6015           |
| Alone with no minor children | \$ 12434                       | \$ 13302          |
| With parent(s)               | \$ 21681                       | \$ 23925          |
| With other relatives         | \$ 18328                       | \$ 20388          |
| With non-relatives           | \$ 18614                       | \$ 19036          |
| II: Single - No children     |                                |                   |
| Alone                        | \$ 953                         | \$ 2132           |
| With parent(s)               | \$ 25597                       | \$ 26419          |
| With other relatives         | \$ 21633                       | \$ 22770          |
| With non-relatives           | \$ 11392                       | \$ 13029          |



The remaining living arrangements all involve sharing housing with other persons. In such arrangements, average household incomes are close to the median for all American households, the exception being single persons living with non-relatives, clearly poor households.

#### 1970-1988 Changes in the Precariously Housed

Has the size of the precariously housed increased over the past two decades? To answer that question we can turn to Table IV.4, which presents the results of employing the same techniques and definitions to the 1970 CPS, using, of course, the poverty level definitions applicable at the time (1969).

Table IV.4 is modelled after Table IV.2. Hence a cell by cell comparison represents the differences in sizes of the extremely poor in 1987 as compared to 1969. The most striking difference is in the total size of the extremely poor, almost 3 million in 1969 but 5.5 million in 1987, under the 50% poverty level cutoff, with comparable differences using the 75% cutoff, 4.1 millions compared to 8.1 millions. Of course, differences of this sort after almost two decades represent both changes in poverty and changes in the size of the total population in question. In the two decades in question, the size of the young adult population of the United States increased considerably. Taking that growth into account by computing the prevalence of being precariously housed per 100 adults aged 22 to 59 in 1970 and 1988, there appears to have been an increase of about 30% in the prevalence of that condition in the two decades.

Prevalence in 1988 = 21 per 100 unattached persons 22-59

Prevalence in 1970 = 16 per 100 unattached persons 22-59

TABLE IV.4: Estimates of The Precariously Housed Based on the 1970 CPS: Unattached Persons, 22 to 59, Non-Students, Non-Farm, Under Varying 1969 Income Cutoffs

| March 1970 Living Arrangements     | (000s) | 1969 INCOME                  |              |                              |              |
|------------------------------------|--------|------------------------------|--------------|------------------------------|--------------|
|                                    |        | 50% of Poverty Level or Less |              | 75% of Poverty Level or Less |              |
|                                    |        | Number                       | %            | Number                       | %            |
|                                    |        | (000s)                       | (000s)       |                              |              |
| I: Single Parents                  |        |                              |              |                              |              |
| Alone with minor children          |        | 591                          | 20.1         | 981                          | 23.8         |
| Alone with all children 18 or over |        | 122                          | 4.1          | 170                          | 4.1          |
| With parent(s)                     |        | 95                           | 3.2          | 123                          | 3.0          |
| With other relatives               |        | 27                           | .9           | 37                           | .9           |
| With non-relatives                 |        | 18                           | .6           | 20                           | .5           |
| TOTAL SINGLE PARENTS               |        | <u>853</u>                   | <u>28.9</u>  | <u>1331</u>                  | <u>32.3</u>  |
| II: Single Persons - No Children   |        |                              |              |                              |              |
| Alone                              |        | 454                          | 15.4         | 737                          | 17.9         |
| With parent(s)                     |        | 888                          | 30.1         | 1109                         | 26.9         |
| With other relatives               |        | 504                          | 17.1         | 627                          | 15.2         |
| With non-relatives                 |        | 248                          | 8.4          | 324                          | 7.8          |
| TOTAL SINGLE PERSONS               |        | <u>2094</u>                  | <u>71.0</u>  | <u>2797</u>                  | <u>67.8</u>  |
| <u>Total -----</u>                 |        | <u>2947</u>                  | <u>100.0</u> | <u>4129</u>                  | <u>100.0</u> |

In addition, there is a quite dramatic difference in the composition of the precariously housed. In 1969, single parents constituted less than a third of the hidden homeless whereas in 1987, this group held more than two out of five of that group. This change largely reflects the growth in the numbers of single parent families in the two decades in question. The changes in the sizes of the remaining categories may be viewed as largely adjustments to the growth of the single parent category.

#### Selected Salient Demographic and Economic Characteristics

The precariously housed are quite a heterogeneous group, as their living arrangements suggest, and as Table IV.5 documents. Perhaps the most dramatic difference is that all but a few of the single parents are female. Each of the single parent groups distinguished in Panel A, are composed of more than 90% women. In contrast, women constitute less than half of all but one of the single persons' groups in Panel B. Men dominate numerically single persons living in their parental households (63% are men), and among those who are living with non-relatives (59%). Men and women are more closely matched numerically among single persons living alone (53% men) and among those living with relatives other than parents (50%).

The age compositions of the precariously housed also vary dramatically. With the exception of single parents living with their adult children, all of the single parent groups are younger on the average than the corresponding group of single persons.<sup>47</sup> For example, single parents living alone have an average age of 34 in contrast to 43 for single persons. Note also that although there are many single persons in their twenties who are living with their parents, the average age for such persons is 38, indicating that large proportions of this group are in their forties and perhaps 50s.

Perhaps the most important feature about the age composition of the precariously housed is that the overall average, 35, is very close to the average age of the current literal homeless, 36, as shown in the 56 studies summarized in Part II.

---

<sup>47</sup> It should be noted that among the literal homeless, on the average women tend to be up to ten years younger than men.

The racial composition of the precariously housed also varies widely from subgroup to subgroup. Blacks constitute close to half (45%) of the single parents living alone with their minor children or living in their parental households (47%) and close to three out of five (57%) of single parents living with relatives other than their parents. Blacks are more than one third (36%) of single parents living with their adult children and of those living with non-relatives (37%).

Blacks are smaller proportions of the single person groups, ranging from one in four (25%) of single persons living with other relatives to one in three (31%) of those living with non-relatives.

The overall proportion black among the precariously housed is 34%, appreciably lower than the proportion black (45%) found among the literal homeless. Because we know that the racial composition of the homeless varies so widely from place to place, as shown in Part II, we cannot have much confidence in the results obtained concerning race from pooling the 56 literal homeless studies. No reasonably convincing interpretations can be made concerning the racial composition differences between the literal homeless and the precariously housed.

The next two rows in both panels of Table IV.5 provide some clues about how some of the extremely poor manage to get along, especially those who are not sharing housing with others. Almost three out of five (59%) of single parents with minor children received AFDC payments in 1987. Although none of the other eligible<sup>48</sup> single parent groups had as high a level of AFDC support, the proportions run from a low of 27% for single parents living with non-relatives to 42% among those living with relatives other than their parents.

As might be expected, only minute proportions (2% or less) of the single persons claimed to have received AFDC income in 1987. Indeed, these responses may simply be errors or represent the effects of the disjunction in times between the measurement of current living arrangements and previous year's income and its sources: It is conceivable that a few of the single persons who were not taking any responsibility for children in 1988 were doing so in 1987

---

<sup>48</sup> Single parents with no minor children are, of course, not eligible for AFDC support. The 6% who claim to have had some AFDC income in 1987 may have had children who fell into the eligible category in 1987 but not in 1988 when their ages were recorded in the CPS.

and received AFDC income in that connection.

Receipt of public assistance funds, other than AFDC, is also shown in Table IV.5. The major form of "other public assistance" involved are state funded general assistance programs (also known as general relief in some states). Although overall only 6% of the precariously housed received some support from "other public assistance", single persons were much more likely to receive this form of assistance than single parents<sup>49</sup>. Among single persons living alone, 15% received some help from "other public assistance" in 1987. Single persons living with non-relatives also had a relatively high enrollment rate, 9%.

The last lines in Panels A and B concern the 1988 labor force status of the precariously housed. In the first instance, they were classified as among the precariously housed because of their disastrously low income in 1987. For some, this low income may have represented an episode of unemployment brought about by illness or institutionalization or the adjustment period after loss of employment. For others, the episode was simply another year of low income following previous years of low income. One year's income does not allow one to distinguish between the bad luck of a poor year and the bad fortune of a career of unemployment and poor employment. The only clue available in the CPS is the current work status of individuals: The precariously housed persons who were working in March 1988 after a year of very low income undoubtedly includes those who are coming out of their run of bad luck and who may be earning enough in the future to take them out of the precariously housed population group.

The proportion of the 1987 precariously housed who were working in March 1988 was surprisingly high: Almost one in three were working in March 1988. Proportionately fewer of single parents were working than single persons, about one in four of most of the single parent groups working compared to about two in five of the single persons.

---

<sup>49</sup> In many states, persons are put on state funded programs only if they are not eligible for some federally funded program. This means that if a person is eligible to receive AFDC payments because of responsibility for minor children, welfare personnel will enroll that person in AFDC rather than general assistance.

Table IV.5: Selected Demographic and Economic Characteristics of the 1988 Extremely Poor, aged 22-59, 1987 Income 50% or less of Poverty Level.

A. Single Parents:

|                                   | Living Arrangements in 1988 |          |             |               |              |
|-----------------------------------|-----------------------------|----------|-------------|---------------|--------------|
|                                   | Alone with<br>minor         | no minor | Par-<br>ent | Other<br>rels | Non-<br>rels |
| Percent Female                    | 93.8                        | 90.9     | 92.0        | 100.0         | 98.4         |
| Percent Black                     | 45.4                        | 35.5     | 47.4        | 57.0          | 36.5         |
| Average Age                       | 34                          | 51       | 29          | 30            | 32           |
| Percent AFDC<br>in 1987           | 58.5                        | 6.4      | 31.9        | 41.6          | 27.1         |
| Percent 1987 Public<br>Assistance | 4.3                         | 8.6      | 1.3         | 6.3           | 3.7          |
| Percent<br>Working, 1988          | 23.8                        | 25.8     | 30.2        | 25.8          | 25.7         |

B. Single Persons - No Children

|                              | Living Arrangements in 1988 |            |               |              |
|------------------------------|-----------------------------|------------|---------------|--------------|
|                              | Alone                       | Par<br>ent | Other<br>Rels | Non-<br>Rels |
| Percent Female               | 47.2                        | 37.1       | 50.3          | 41.3         |
| Percent Black                | 28.1                        | 27.0       | 25.3          | 31.3         |
| Average age                  | 43                          | 31         | 38            | 37           |
| Percent AFDC                 | 1.3                         | 1.8        | 1.6           | .8           |
| Percent Public<br>Assistance | 14.6                        | 2.3        | 7.4           | 9.2          |
| Percent<br>Working, 1988     | 37.5                        | 39.2       | 33.5          | 53.7         |

This last set of findings concerning the 1988 employment status of the 1987 precariously housed suggests that for many being precariously housed is a transitory state, the consequence perhaps of a run of bad luck. We may speculate that adults who suffer from the disabilities discussed in Part II are those who are most likely to remain in the precariously housed condition and hence be particularly vulnerable to becoming literally homeless. Of course, only longitudinal studies that trace the income trajectories and housing arrangements of unattached adults can provide the hard data necessary.

## REFERENCES

- Bach, Victor and Steinhagen, Renee Alternatives to the Welfare Hotels (Community Service Society, 1987).
- Bahr, Howard H. and Garrett, Gerald Women Alone (Lexington, Ma.: Lexington Books, 1976).
- Bahr, Howard M. and Caplow, Theodore Old Men: Drunk and Sober (New York: New York University Press, 1974).
- Blumberg, Leonard, Shipley, Thomas E., Jr, and Shandler, Irving W. Skid Row and Its Alternatives (Philadelphia: Temple University Press, 1973).
- Bogue, Donald B. Skid Row in American Cities (Chicago: Community and Family Study Center, University of Chicago, 1963).
- Cohen, Carl I. and Sokolovsky. Old Men of The Bowery: Strategies For Survival Among The Homeless (New York and London: The Guilford Press, 1989).
- Lee, Barrett A. "The Disappearance of Skid Row: Some Ecological Evidence". Urban Affairs Quarterly. Sept 1980. Vol.16, 1 pp81-101.
- Rossi, Peter H. Down and Out in America: The Origins of Homelessness (Chicago: The University of Chicago, 1989).
- Stagner, Matthew and Harold Richman General Assistance Profiles: Findings from a Longitudinal Study of Newly Approved Recipients. June 1985. Illinois Department of Public Aid.
- Sutherland, Edwin H. and Locke, Harvet J. Twenty Thousand Homeless Men: A Study of Unemployed Men in Chicago Shelters (Chicago: J. B. Lippincott, 1936).
- U.S. Department of Housing and Urban Development A Report to the Secretary on the Homeless and Emergency Shelters (Washington, DC: Office of Policy Development and Research, 1984).





## APPENDIX A

### Studies Used in Part II

Note that several studies may be reported in one reference.

- Baker, S. and Snow, D. "Homelessness in Texas: Estimates of Population Size and Demographic Composition" in Homelessness in the U.S. Vol. I: State Surveys by J. A. Momeni (ed.) (New York, London: Greenwood Press, 1989).
- Bauman, D., Grisby, Beavais, and Schultz The Austin Homeless (Austin: University of Texas, 1985).
- Brown, C., McFarlane, Paredes, and Stark The Homeless of Phoenix: Who Are They and What Should Be Done (Summer Study) (Phoenix: Phoenix South Community Health Center, 1983).
- Brown, C., McFarlane, Paredes, and Stark The Homeless of Phoenix: Who Are They and What Should Be Done (Winter Study) (Phoenix: Phoenix South Community Health Center, 1983).
- Brown, C., McFarlane, Paredes, and Stark The Homeless of Phoenix: Who Are They and What Should Be Done (Census) (Phoenix: Phoenix South Community Health Center, 1983).
- Burt, M. and Cohen Feeding the Homeless: Does the Prepared Meals Provision Help? (An Urban Institute report prepared for the Food and Nutrition Service: U.S. Department of Agriculture, 1988).
- Chaiklin, H. Report On the Homeless: Needs of Soup Kitchen (Baltimore: University of Maryland School of Social Work, 1985).
- Chaiklin, H. Report On the Homeless: Service Needs of A Shelter (Baltimore: University of Maryland School of Social Work, 1985).
- Chicago Coalition for the Homeless When You Don't Have Anything: A Street Survey of Homeless People In Chicago (Chicago: Chicago Coalition for the Homeless, 1983).
- Crystal, S. Chronic And Situational Dependency: Long Term Residents In a Shelter (New York: Human Resources Administration, 1982).
- Crystal, S. New Arrivals: First Time Shelter Clients (New York: Human Resources Administration, 1982).
- Crystal, S. and Goldstein, M. Correlates of Shelter Utilization: One Day Study (Fort Washington Army) (New York: Human Resources Administration, Family and Adult Services, 1984).
- Crystal, S. and Goldstein, M. Correlates of Shelter Utilization: One Day Study (Greenpoint Shelter) (New York: Human Resources Administration, Family and Adult Services, 1984).

- Crystal, S. and Goldstein, M. Correlates of Shelter Utilization: One Day Study (Women's Shelter Annex) (New York: Human Resources Administration, Family and Adult Services, 1984).
- Crystal, S. and Goldstein, M. The Homeless in New York City Shelters (Men in Shelters) (New York: Human Resources Administration, Family and Adult Services, 1984).
- Crystal, S. and Goldstein, M. The Homeless in New York City Shelters (Women in Shelters) (New York: Human Resources Administration, Family and Adult Services, 1984).
- Crystal, S. Ladner, and Towber Multiple Impairment Patterns in the Mentally Ill Homeless (New York: Human Resources Administration, year published unspecified).
- Dockett, K. Street Homeless People in the District of Columbia: Characteristics and Service Needs (Washington, DC: University of the District of Columbia, 1989).
- Farr, R., Koegel, and Burnam A Study Of Homelessness and Mental Illness in the Skid Row in LA (Los Angeles: Los Angeles County Department of Public Health, 1986).
- Fisher, P., Shapiro, Breakey, Anthony, and Kramer Mental Health of the Homeless: A Survey of Mission Users (Baltimore: Johns Hopkins University, Department of Psychiatry, 1984).
- Freeman, R. and Hall Permanent Homelessness In America? (New York: National Bureau of Economic Research, 1986).
- Hamilton, Rabinowitz, and Alshuler The 1986 L.A. Skid Row Demographic Survey (Los Angeles: Hamilton Rabinowitz Alshuler Inc., 1986).
- Institute for Research on Poverty, University of Wisconsin "Tracking the Homeless" Focus, Institute for Research on Poverty, University of Wisconsin, 1987.
- James, F. Numbers and Characteristics of the Homeless: A Preliminary Application in Colorado of a New Methodology (Denver: University of Colorado at Denver, 1988).
- LaGory, M., Ritchey, F., and Mullins, J. The Homeless of Alabama (Phase 1 & 2) (Birmingham: University of Alabama Birmingham, Department of Sociology, 1987).
- LaGory, M., Ritchey, F., and Mullins, J. The Homeless of Alabama (Phase 3) (Birmingham: University of Alabama Birmingham, Department of Sociology, 1987).
- Lee, B. Homelessness in Tennessee (Memphis) (Nashville: Vanderbilt University, Department of Sociology, year published unspecified).
- Lee, B. Homelessness in Tennessee (Chattanooga) (Nashville: Vanderbilt University, Department of Sociology, year published unspecified).
- Lee, B. Homelessness in Tennessee (Knoxville) (Nashville: Vanderbilt University, Department of Sociology, year published unspecified).

- Lee, B. Homelessness in Tennessee (Nashville) (Nashville: Vanderbilt University, Department of Sociology, year published unspecified).
- Maurin, J. and Russell, L. "Homelessness in Utah" in Homelessness in the U.S. Vol. I: State Surveys by J. Momeni (ed.) (New York, London: Greenwood Press, 1989).
- Morse, G., Shields, Hanneke, Calsyn, Burger, and Nelson Homeless People In St. Louis: A Mental Health Program Evaluation (St. Louis, Missouri: Department of Mental Health, State of Missouri, 1985).
- Mowbray, C., Johnson, and Solarz Homelessness in a State Hospital Population (Detroit: Hospital and Community Psychiatry, 1987).
- Mowbray, C., Solarz, Combs, and Johnson "Mental Health and Homelessness in Detroit" Psychosocial Rehabilitation Journal, October 1986.
- Owen, G., Mattessich, and Williams Results of the Twin City Survey of Emergency Shelter Residents (Prepared by the Wilder Research Center, Minneapolis, MN, 1987).
- Philadelphia Health Management Corporation Homelessness In Philadelphia (Interviews) (Philadelphia: Philadelphia Health Management Corporation, 1985).
- Philadelphia Health Management Corporation Homelessness In Philadelphia: People, Needs and Services (Admissions) (Philadelphia: Philadelphia Health Management Corporation, 1985).
- Providence Center for Counseling and Psychiatric Services Delivering Mental Health Services to the Homeless: A Survey of the Service Needs of the Homeless (Providence, Rhode Island: Providence Center for Counseling and Psychiatric Services, 1987).
- Rafferty, Y. "Developmental and Educational Consequences of Homelessness on Children and Youth" (Unpublished paper prepared for the Johns Hopkins University Institute for Policy Studies Conference - Homeless Children and Youth: Coping With a National Tragedy April 25-28, 1989 Washington, DC) (Baltimore: Johns Hopkins University).
- Robinson, F. Homeless People In The Nations Capital (Washington, DC: University of the District of Columbia, 1985).
- Ropers, R. The Rise of the Urban Homeless (Los Angeles: Public Affairs Report, University of California, Berkeley, 1985).
- Ropers, R. The Invisible Homeless: A New Urban Ecology (Single Resident Occupancy study) (New York: Insight Books, 1988).
- Ropers, R. and Robertson The Inner City Homeless of LA: An Empirical Assessment (Los Angeles: UCLA School of Public Health, 1984).
- Rossi, P., Fisher, and Willis The Condition of the Homeless of Chicago, 1986 (Amherst, MA. Social and Demographic Research Institute, University of Massachusetts at Amherst,

1986).

- Roth, D., Bean, Lust, and Saveanu Homelessness in Ohio: A Study of People In Need (Ohio: Ohio Department of Mental Health, 1985).
- Schutt, R. Health Problems and Service Needs Among Boston's Homeless (Paper presented at the symposium on Homelessness and Extreme Poverty at the AAAS 1988 Annual Meetings in Boston) (Boston: University of Massachusetts at Boston, unpublished).
- Schutt, R. and Garrett A Report on the Homeless: New Guests At the Long Island Shelter (Boston: University of Massachusetts at Boston, Department of Sociology, year published unspecified).
- Schutt, R. and Garrett Homeless In Boston 1985: The View From Long Island (Boston: University of Massachusetts at Boston, Department of Sociology, year published unspecified).
- Shaffer, D. and Caton Runaway and Homeless Youth In New York City (New York: Columbia University College of Physicians, 1984).
- Snow, D., Baker, Anderson, and Martin The Myth of Pervasive Mental Illness Among the Homeless (Social Problems, June 1986).
- Solarz, A., and Bogat An Examination of Criminal Behavior Among the Homeless (Detroit: Michigan State University, Department of Psychology, 1986).
- Solarz, A. Social Support Among the Homeless (Detroit: Michigan State University, Department of Psychology, 1985).
- Sosin, M., Colson, and Grossman Homelessness in Chicago: Poverty and Pathology, Social Institutions, and Social Change (Chicago: The Chicago Community Trust, 1988).
- Struening, E. A Study of Residents of the New York City Shelter System (New York: New York City Department of Mental Health, 1987).
- Woods, W. and Burdell, E. Homelessness in Cincinnati (Cincinnati: Applied Information Resources, 1987).
- Wright, J. and Weber, D. Homelessness and Health. New York. McGraw-Hill, 1987. (Special tabulations from the clinic data reported here were also made at the Social and Demographic Research Institute.